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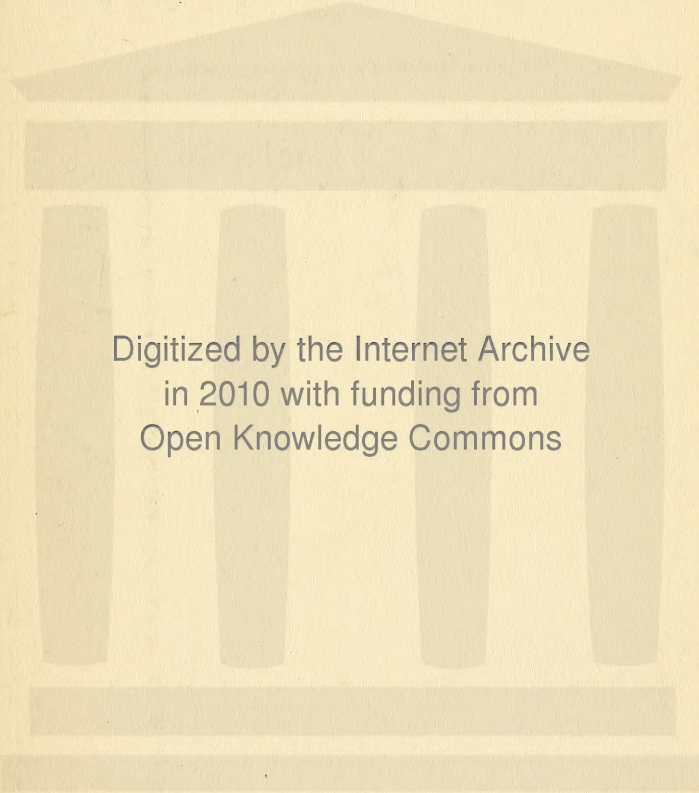
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MISS DOROTHEA L. DIX.

(From a painting in the possession of the Nova Scotia Hospital.)

THE INSTITUTIONAL CARE OF THE INSANE

IN THE
UNITED STATES AND CANADA

BY

HENRY M. HURD, WILLIAM F. DREWRY, RICHARD DEWEY,
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PART IV
PROVINCIAL, CORPORATE AND
PRIVATE INSTITUTIONS
IN CANADA

THE CARE OF THE INSANE IN ALBERTA.

INSANE ASYLUM.

PONOKA.

Prior to its organization as a separate province, 1st September, 1905, Alberta formed a part of the Northwest Territory, and, by special arrangement with the Dominion Government, all cases of insanity occurring therein were cared for in the provincial asylums of Manitoba, the rate paid by the federal government for their keep being one dollar per day each. On its conversion into a separate entity, the attention of the government was soon turned toward the necessity for the creation of an establishment for the custody of the insane, not only for those then interned in Manitoban institutions, but for the care and treatment of future cases that were to be looked for.

The result was the passage in 1907 of an act entitled the "Insanity Act,"¹ which gave the Lieutenant-Governor in Council power to build an asylum or to lease any building for temporary use until a proper asylum was established. The act further provided that until provision for their care within the province was made insane persons were to be sent to an asylum in Manitoba, or some other province, at a rate to be mutually agreed upon. Treaty Indians were not to be removed to an asylum unless the expense of their maintenance was guaranteed by the Superintendent-General of Indian Affairs for the Dominion Government. The insane and their affairs were placed in charge of the Department of the Attorney-General.²

The former course was decided upon, and, after considerable discussion, a site was finally chosen, about one and three-quarter miles from Ponoka, a town located upon the Canadian Pacific Railway, between the cities of Calgary and Edmonton, the latter of which had been constituted the capital of the newly fledged

¹ Statutes of Alberta, 7th ed., VII, Cap. 7.

² This clause was subsequently amended so that the care of these unfortunates was relegated to the Department of the Hon. Provincial Secretary.

province. It consisted of 800 acres of land running along what had formerly been the old Hudson's Bay Company trail between these two places.

Work was begun August 1, 1908, from plans prepared by A. M. Jeffers, Provincial Architect, and ere the close of the building season substantial progress had been made.

In its general layout the plan of the building was based on the acute hospital building at Utica, N. Y., on information secured from the architect's department of that state, the only important change made being that special rooms for uncleanly patients were placed at the outside ends of the large dormitories, terminating the corridors, in order to minimize the discomfort caused by this class of patients to others when congregated with them.

On account of its isolated location, and the consequent lack of fire protection from outside sources, it was decided to build entirely of fireproof materials. The tenders accepted, therefore, called for a building with stone and brick masonry walls, Calgary sandstone being the stone used; steel, concrete and terra cotta block construction and plaster trim. The heating was arranged under two systems, viz.: a warm-air blower system for private rooms, and direct steam radiation, controlled by thermostats, at exposed points in day-rooms, dormitories, corridors, etc. Provision was also made for electric lighting and fire-alarm systems.

The general design of the building is that of a cross, composed of a central administration building, 139 feet long by 45 feet wide, flanked on each side by wings for the patients, each 95 feet long by 42 feet wide. All portions of the edifice are three stories high, with basement extending under the entire structure.

The ground floor of the administration building contains, in front, offices for the superintendent, bursar and matron, reception room, and officers' and nurses' dining rooms; in the rear, two congregate dining rooms for patients, each 20 feet wide by 32 feet long, the partition separating them being movable so that the two rooms can be made into an assembly hall, 40 x 64 feet. Behind the dining rooms is located a service room, and back of that the kitchen, with refrigerator.

In the front part of the administration building, on the second floor, are quarters for the medical officers, matron, and female trained nurses, while in the rear portion are special treatment

rooms for massage, electrotherapy and hydrotherapy; also linen rooms, etc.

On the third floor, in front, are quarters for male and female nurses, while the rear part of the flat is adapted for infirmary purposes, provision being made for male and female patients, with operating room, etc.

The wings, one for men and the other for women, consist of longitudinal corridors, opening off which, at the rear, are work rooms, sitting rooms, and sleeping rooms. At the end of each corridor is a large day room, having a fireplace and bay windows. On each side of the administration building, at the ends of the corridors, are fireproof staircases, with fire doors opening onto them from each flat. Similar staircases are located at the outer ends of the wings. Paralleling each corridor, in front, on the several flats, is a sun-porch, 12 feet wide by 33 feet long, which affords outdoor exercise during unfavorable weather.

In the center of the building, opening off the cross corridor which separates the front and rear portions of the administration building, is a combined passenger and freight elevator large enough to accommodate a sick patient lying at full length on a portable bed or stretcher.

In an isolated power house, joined to the center building by a tunnel, is generated high-pressure steam for the driving of an engine which is directly connected to a current generator. This furnishes electricity for lighting the buildings and grounds, operating the elevator, laundry equipment, and water supply pumps, and for the electric treatment apparatus. Steam, under high pressure, is also supplied to the laundry for water heating purposes, and to the kitchen for cooking purposes.

The laundry was originally designed to be located in the basement of the center building, where also is installed a warm-air heating and ventilating plant. Here, outside air is introduced into a warming chamber (heated by steam) and forced by a motor-driven fan through a water spray to cleanse and humidify it, after which it is distributed to the various outlets.¹ Later, however, it was decided that, instead of the laundry being placed in the basement of the administration building, it should form

¹ Annual report Department of Public Works, 1908.

a part of the power house, which was made larger than originally designed for that purpose. This work was completed in 1910, as was also the erection of a water tower with a tank of 80,000 gallons capacity, raised to a height of 130 feet, as a reserve water supply for fire protection. The water supply is obtained from a well 200 feet deep located in the boiler room. From this the water is lifted into the tower by a deep-well steam pump. To treat sewage before being discharged into a neighboring stream, about half a mile from the institution, a series of concrete live-earth beds were constructed and covered with a neat frame building.

On account of the unsatisfactory nature of the subsoil, all the various structures connected with the establishment, with the exception of the live-earth beds, rest on pile foundations, driven to a depth of 25 feet below the surface of the ground.¹

Externally the building presents a substantial appearance, with rock-faced, coarse sandstone basement, supporting the three-story brick structure above, the main entrance porch and the porches of the wings relieving the uniformity of the brickwork. The structure is finished with a high cement plaster frieze of a buff color, and a large overhanging cornice supported by heavy brackets, the whole topped with a low-pitched roof.

Early in 1911 the Hon. A. J. McLean, Provincial Secretary of the Province, made an extended inspection of various asylums in Canada and the United States with a view to securing the most efficient administration of the Ponoka institution, which was opened for the admission of patients on July 4th of the same year, the first patient, a woman, being received on that date. Dr. T. Dawson, medical health officer of the City of Calgary, had been appointed medical superintendent, assuming duty as such in April.

On July 24th 164 patients—108 men and 56 women—all practically chronic and incurable cases, but former residents of Alberta, were transferred from Brandon Asylum, Manitoba, to the new establishment. During the same month 16 new cases were received, which number, before the close of the year, was increased to 52.

In his first annual report the superintendent deploras the unnecessary delay shown in the sending of recent cases to the hospital, stating that pending a report of the Attorney-General many were

¹ Annual report Department of Public Works, 1910.

detained in the barracks, where the accommodation for their proper care and treatment was insufficient; he also states that they had not yet inaugurated any outside sports, except football, from which even the female patients got considerable amusement, but hoped to do so in the coming summer. The erection of a mortuary was also urged, and the suggestion made that a post-mortem and pathological room should be attached to it, "where each body could be examined and the cause of death verified, thereby creating an interest in the work, and where in time pathological research work could be done."¹

Owing to the rapidly growing population of the province, the demands for admission to the asylum became so great that it was found necessary to start, almost immediately, the construction of an additional building for men, 143 feet long and 61 feet wide, with an extension of 19 feet by 23 feet, four stories in height, including a basement in which were located work and recreation rooms. The ground and first floors were designed for the use of patients, while the top floor provided accommodation for farm hands and other outside employees. This work, begun in August, 1911, was completed in 1912. At the same time two six-roomed brick cottages were erected as residences for the medical superintendent and the bursar.² The construction of an additional building for females is now being entered upon.

At the close of the year 1913 the number of patients in residence was 287, viz., 201 men and 86 women, the capacity of the institution being about 400.

Estimating the population of the province at 415,000, the number of insane in hospital residence would be about 1 in 1445, a remarkably small showing when compared with older countries, especially if we take into consideration the hardships incident to pioneer life.

¹ Report of the medical superintendent in annual report of Department of the Provincial Secretary, 1911.

² Annual reports of Department of Public Works, 1911 and 1912.

THE CARE OF THE INSANE IN BRITISH COLUMBIA.
PUBLIC HOSPITAL FOR THE INSANE.
NEW WESTMINSTER.

Insanity among the Pacific Coast aborigines seems to have been much less common than among those of the Atlantic seaboard, as gauged by the "Jesuit Relations." The only authenticated case referred to in collections of Northwest Americana is that of Tootoosch, a brother-in-law of Maquina, chief of the Nootka Sound Indians. For this we are indebted to a work called "A Narrative of the Adventures and Sufferings of John R. Jewitt; Only Survivor of the Crew of the Ship *Boston*, During a Captivity of Nearly Three Years Among the Savages of Nootka Sound." It is commonly cited as "Jewitt's Narrative" and there are several editions of it, one of the earliest being that published in New York in 1816.¹

At the present date there are 20 Indian patients resident in the hospital out of 52 who have been received since its inception.

In the early days of British Columbia, lunatics (few and far between at that time) were placed in the colonial jail, in Victoria. Dr. J. S. Helmcken (afterward M. P. P., and Speaker of the House) was the first physician in the province to come in official contact with the insane, by virtue of his position as jail surgeon for a period of over 50 years.

The earliest record obtainable of an insane person on the Coast dates back to the year 1850, when a young Scotch immigrant became deranged soon after his arrival. He was sent home on a sailing vessel, and, as was subsequently learned, he recovered.

Cases were less rare during the rush to the Cariboo gold fields, and during the years 1858 and 1859 many new-comers broke down under the mental strain and hardships endured, and had to be taken charge of by the authorities. There were then no towns upon the mainland; Victoria, which was a Hudsons' Bay Company post, was the outfitting depot for the gold fields, and all persons

¹ See "Insanity Among the Indians," Vol. I, Chap. XI, p. 393.

entering into and passing out of the country by the regular route must needs go there, the bulk of them coming via San Francisco. It was owing to this that the authorities began to send the insane back to California, where were the nearest asylums. There they were committed to one of the institutions belonging to that state. This went very well for a time until the Americans gave the government to understand that the practice could not continue, but that if British Columbia were willing to pay for these patients some arrangement might be made. This suggestion, however, was not acted upon, and the insane were kept in the jail at Victoria, until it became too full to hold any more. Then, as more violent and urgent cases presented themselves, the more manageable ones were sent to the Royal Hospital.

The jail of those days was not large, containing only 10 or 12 cells. It was of hewn logs at first, but some years later a brick administrative building, two stories in height, was erected in front of it. The site was the same as that now occupied by the Law Courts on Bastion Street.

The Royal Hospital, for men only, was a wooden building situated upon the Songhees Indian Reserve, opposite the city. It had been originally built for a smallpox hospital, then added to and used as a general hospital.

So long as the patients were of the male sex the jail and Royal Hospital served for asylum purposes fairly well, but when female patients began to appear it was evident that something further would have to be done. Under these circumstances the ladies of Victoria opened a women's hospital on Pandora Street. This, however, soon fell into financial difficulties and it was suggested that it and the Royal Hospital should be amalgamated, on condition that a ward was kept open for women. It was so arranged and the building of the Royal Hospital vacated in favor of that on Pandora Street.

In 1872 two insane female patients came under the notice of Dr. I. W. Powell, and he suggested to the government that the old Royal Hospital, previously vacated, should be remodeled and made into an asylum proper. This was done, and on October 12 of that year the remodeled building was opened as the first provincial asylum, which function it was destined to fill for the space of five and a half years. The Provincial Secretary took

charge of the new institution, and its management has been under his department ever since.

The building was a simple structure of modest appearance, about 50 feet by 40 feet, and had an upper story, the whole being of wood and whitewashed. A door from the upper story led out upon a balcony, from which was a fine view of the harbor. Altogether, the situation was a pleasant one. Inside, the building was somewhat rearranged, every available space being converted into cells or very small single rooms.

On the opening day seven patients were admitted, among them the two women referred to, who, by the way, were sisters; still another sister was admitted two days later. Dr. I. W. Powell was appointed medical superintendent, but, like several of his successors, was non-resident, while E. A. Sharpe was made "superintendent of the asylum," and Mrs. Flora Ross, matron, a position she continued to hold up to her death in November, 1897. There were three "keepers" or male attendants, a cook and an Indian wash-woman. In fact, there were almost as many employees as patients.

The records for the year show 18 admissions, one recovery, and one death.

Crude as things must have been in this embryo asylum, there were malingering applicants for admission. Dr. Helmcken tells of one who pretended to be not only insane but paralyzed, but as his attempt at deception was suspected, the physician took a pail of water and suddenly dashed the contents upon the would-be lunatic, who immediately made a complete recovery.

There can be little doubt that the structure internally was ill-adapted for its work. To keep order, at times it was found needful to resort to restraint, which feature developed and remained for a considerable period of time.

Up to 1873 no act had been passed for the founding or regulation of asylums, but in that year the one known as the "Insane Asylums Act,"¹ was placed on the statutes, and continued in force for 20 years. It fixed the title of the establishment as "Asylum for the Insane, British Columbia," and placed the management in the hands of a "medical superintendent" and a "superintendent

¹ 51 Vict., Chap. 61 (1873, No. 28, S. 26).

of the asylum," the former being non-resident, and the latter a resident layman, whose duty it was to look after the internal economy and discipline. It made no provision for a statistical form of history, and so very little information is to be gleaned about the patients treated in those pioneer days. The act of 1873 was amended in 1893¹ and, together with the amendment, repealed in 1897, a new act, the "Hospitals for Insane Act,"² replacing it. By this the official title of the asylum was changed to "Public Hospital for Insane."

At the close of the year 1873 Dr. Powell resigned, and was succeeded by Dr. J. B. Matthews on January 1, 1874. Small improvements were continually being made about the buildings, and fences were erected to form enclosed airing courts.

At the end of the year 1872 there were 16 patients in residence, at the end of 1873, 14, and at the end of 1874, 19. At the end of 1875, however, there were 32 patients, and as soon as the spring of 1876 opened a small addition was built to accommodate the increase. On July 1 of that year (1876) J. J. Downey replaced Mr. Sharpe as "superintendent of the asylum," and on December 1 of the following year, Dr. Matthews having resigned, Dr. MacNaughton Jones took charge, and went to live in the institution as the first resident medical superintendent. At the end of 1877 there were 37 patients in residence. The building could accommodate no more and it was neither desirable nor suitable to extend it upon the site then occupied.

It was thereupon decided to remove the institution to the mainland, where, close to the city of New Westminster, there was a large tract of provincial land. This site it still occupies. Some 15 acres, later increased to 100, of this tract, most of it dense, unclaimed forest, was apportioned to an asylum. Here the nucleus of the present hospital was erected in 1877-78. The location selected is situated on the north bank of the Fraser River, between the main part of the city of New Westminster and that portion called Sapperton, from its once having been the site of the Royal Engineers' camp, when a detachment of that corps was on service in Canada. The Dominion Government reserve, on which is located the penitentiary, lies next and parallel to the asylum

¹ 56 Vict., Chap. 18.

² 60 Vict., Chap. 17.

property. The bank of the Fraser, which forms the front of the property, rises to a considerable height. Mount Baker is plainly visible in the east, while to the north are seen the coast range of the Rockies.

The land varied greatly in the character of its soil. That upon the river end, which was the part built upon, was fairly good, being a sandy loam, but, looking toward the establishment of an institution farm, it presented no rich promise. However, for convenience to the base of supplies and to the centers whence most patients were likely to come, the site could not have been better.

The first building constructed cost about \$24,000, and was a two-story brick building, heated by stoves and open fireplaces, lighted by coal-oil lamps, and very badly ventilated. It was 125 feet long by 25 feet wide, with a main entrance in the center, projecting about 20 feet to the front. A narrow hall ran from the front door through to the rear, dividing the interior into two sections, with a ward in each. The same plan prevailed upstairs, making four wards in all. The rooms for patients were single, and of these each ward had seven, with a day room and lavatory, but no water closets. These latter were situated outside. A peculiarity of the wards was the unusual height of the window sills from the floor, it being so great that no one could see out of the windows unless he stood upon some object as high as a table, which, as one annual report says, was a very common way for patients to spend hours. This defect, coupled with that of having heavy iron bars for window guards, made the wards gloomy, and as they were provided with no decorations, no carpets, nor curtains, and very little furniture, one can only wonder how the patients put in the time, and marvel that suicides were not common. Even the bedsteads were home-made and furnished with straw ticks and straw pillows. There was one dining room for all, and the patients from the different wards took their meals serially, the women first. The superintendent and the matron had their quarters in the central part, and this, with accommodations for the employees and store rooms, makes it evident that not much space could have been devoted to the wards. In fact, the one small building had to accommodate the entire staff and the 38 patients brought over from Victoria.

Such was the structure and fitting up of the first asylum for the insane, built as such, in the province. The nucleus of the present institution was erected in 1877, the transfer of patients from the old hospital at Victoria taking place during the month of May, 1878; by the 17th of that month the patients, 38 in number, had all been removed, together with household goods to the value of about \$800, and the hospital was duly opened. Up to the close of the year of opening, the total admissions, including those to the Victoria Hospital, had been 119, the discharges 50, and the deaths 31.¹

Dr. Jones, the medical officer, and Mrs. Ross, the matron, accompanied the patients to New Westminster, but Mr. Downey, the lay superintendent, gave up his position. On June 30 Dr. Jones also resigned to return to Victoria and take up general practice, and after an interregnum of six months² was succeeded by Dr. Thomas R. McInnes, later Lieutenant-Governor of the province. This change of staff was accompanied by a reversion to the old system of management, Dr. McInnes being made visiting medical officer, and James Phillips lay superintendent.

The 38 patients thus received more than filled the 28 rooms³ and from the very start there was a degree of overcrowding that was not relieved for seven years. It is not to be wondered at that we should soon find Dr. McInnes complaining that, with a population of 49—41 men and 8 women—the institution was so full that the superintendent had to make use of corridors, sitting, bath and clothes rooms for bed space, and had, in addition, to resort to the dangerous and reprehensible practice of putting two patients into some of the single rooms. On this account he strongly urged upon the government the pressing necessity for an addition to accommodate not less than 75 patients.⁴ He also states that the overcrowding, combined as it was with many defects in structure and in the various services, such as the water, heating and lighting,

¹ Annual report on the Asylum for Insane, New Westminster, B. C., year 1878.

² The medical service during this interregnum was rendered partly by Dr. Jones and partly by Dr. McInnes.

³ *Vide*, plan on file in hospital.

⁴ Statutes of British Columbia, Appendix to 46 Vict., page 325, annual report on the Asylum for the Insane, New Westminster, for the year 1882.

was becoming unbearable, and mentions that very little outside work could be done on account of the proximity of the bush and the danger of escapes. Altogether, one gathers from his report that the treatment was simply that of custodial care.

In January, 1883, Dr. McInnes having resigned, the office of visiting physician was temporarily (successively) filled by Drs. Sivewright and Masters until the permanent appointment of Dr. R. I. Bentley on May 31.

During 1884 plans were prepared for throwing out a wing to the north, and its erection was begun. This addition was made 99 feet long by 33 feet wide. The interior was differently planned, the intention being to provide dormitories instead of single rooms, and the corridors were made wide. The cost of this building was \$26,000, and \$4700 more was spent on works in the way of boundary fences and a residence for the superintendent. At the same time improvements were made in the old building by lowering the window sills and constructing a balcony for each ward so that access could be had to it from the day room. This was a specially welcome feature in a climate where the winter season is so unsuited for patients to get out of doors on account of the incessant rains. The building of 1884 retained one feature which is not in vogue in modern asylums, and that is the heavily barred windows, but when one has to take charge of insane criminals, in addition to others mentally afflicted, this is perhaps, after all, the safest window guard. The new structure also possessed a front entrance of its own and was used as an administrative building for a season.

Some attempt was now made at decoration, pictures being framed and placed on the wards, while by using one of the larger rooms it was possible to have divine service once a week, a matter that had been neglected hitherto. The capacity of the institution was raised to about 70 beds, with about 60 patients in residence.

The new structures were opened in 1885, at which time the era of superintendence by a layman ceased, Dr. Bentley, who had hitherto been visiting physician, being appointed resident medical superintendent, with increase of salary, on the 1st of January, while Mr. Phillips, lay superintendent, was made steward. It was arranged that the medical superintendent should occupy the new residence built for him and devote all his time to his work, although he was permitted to attend to the Royal Columbian

Hospital for a while longer, a duty which he had been previously performing.

At this time Dr. Bentley introduced an important innovation in the treatment of the patients by allowing them to go out to work in the grounds, clearing and cultivating the land enclosed within the boundary fences. The employment thus furnished gave the inmates a chance to be out in the open air and sunshine, as well as supplying a means of diversion, and, as the Doctor says in his report, "to see them at it proves that they enjoy it thoroughly."¹ The amusements provided for the patients were at this period of the most meager description. There was no amusement hall, and even as late as 1888 we find the superintendent regretting that they have no piano. "The women," he states, "dance three times a week to music sung by one of their number. The men have a violin and concertina, which may be heard all day long."² During the next three or four years Dr. Bentley lost no opportunity of pointing out to the government that the water, heating and lighting services were thoroughly bad and alterations in them were urgently required. The water supply was at this time got by damming a creek which ran through a ravine about a mile above the asylum. The penitentiary, the grounds of which adjoined those of the asylum, derived its supply from the same source, and the unsanitary condition of affairs is thus reported by the superintendent: "The waterworks, as I have informed the government, have been a source of constant worry, owing to land slides in the penitentiary grounds, through which our main pipe passes. Every pipe in the building is frozen, the well is about dry, and we have been obliged to take the top off the boiler to prevent an accident, and keep it supplied by buckets of water to get sufficient for kitchen purposes. Our supply of water at present consists of what we can dip up with buckets from a ditch at the back of the asylum yard."³ Notwithstanding this strenuous report, the matter was left in abeyance for some years.

In the same report Dr. Bentley strongly expresses the wish to have separate provision made for the Chinese, of whom there

¹ Statutes of British Columbia, Appendix to 49 Vict., page 391; annual report on the Asylum for the Insane, New Westminster, B. C., year 1885.

² *Ibid.*, Appendix to 52 Vict., page 404; annual report for the year 1888.

³ *Ibid.*, Appendix to 53 Vict., page 417; annual report for the year 1889.

were then 27 under care. This was chiefly on account of the dislike of the white patients and their friends towards the two races being housed together. At the time of writing the number of Chinese admitted from 1871 to August, 1913, was 228, and of Japanese 54.

Nothing was done, however, until 1889, when it was decided to add an administration building and another wing. At the same time radical changes were planned for the old structure to make it more nearly conform to modern ideas. It was accordingly widened by adding 12 feet to the frontage. To admit of carrying out this work the building had to be abandoned by the patients, and 20 men were selected and sent to the provincial jail, while the rest were housed in the 1884 building.

The new administration building formed, as it still does, the center of the main block, being three stories high and constructed of brick. It was arranged to contain the officers' quarters and administrative offices, as well as the steward's store rooms, a dispensary, and a reception room for visitors, while the entire top floor was one large hall for amusement purposes. The new wing was slightly larger than either of the others and arranged in the most accepted style of the time, having a wide central corridor with all the bed rooms leading off it, the day room and lavatories being in the center. It would accommodate 55 patients in all, while the alterations in the old building made it of like capacity. The only possible objection to the changes in the old building was doing away with the balconies. This was a distinct loss, but the substitution of modern window screens for the iron bars formerly in use partially made up for it. A new brick kitchen was also built in the rear. Connections were made with the New Westminster Gas Company's pipes, and gas was installed for lighting the wards, but the attendants' rooms were not so provided. Two hot-water furnaces were placed in the basements, and the wards were heated by this means.

We now hear, for the first time, mention of a work-shop, the old kitchen being allotted to the carpenter for his use as such. When all these operations had been completed the government had spent \$55,000, and the institution had a capacity of 165 patients.

The 20 patients in the jail, whose number had been augmented to 27 during the 12 months that building was in progress, were

brought back in August, 1890, making the population at the close of that year 117—102 men and 15 women.

Although there was a large area of virgin-forest land adjoining the institution, little had been done toward the clearing of it, and agricultural operations were conducted on a very limited scale, as indicated by the following excerpt for that year :

We will not be able to put in our spring crop, attend to the weeds during the summer, do the fencing, carpentering, painting, cleaning, roadmaking, etc., unless we are allowed a horse and cart. We ought to have more than one cow. We have tried a few chickens, which are doing well, and we have a couple of pigs.¹

Dr. Bentley also complained of the paucity of attendants; one keeper, he reported, had been nearly killed before he received assistance, through being alone with the patients at meal time. The distribution of attendants was, he stated, as follows: "A ward, 15 women; B ward full, with 24 convalescents, two keepers (one the carpenter and one the outdoor overseer); C ward, for the fractious, has 28 beds with 26 patients, two keepers (one the gardener); D ward has 28 beds, all full of paralyzed, sick and helpless patients. To attend to this ward is the head keeper, who also has charge of the male patients' clothes and a dozen other kinds of work, assisted by the plumber, who has put in part of every day lately looking after the water supply pipes; E ward is unoccupied; F ward is occupied by 23 Chinese and one Indian, under the charge of a single keeper. A second is urgently needed. As each keeper is allowed one afternoon a week away from the institution, the keepers have to change about so that C ward at least shall always have two attendants. If one keeper is away sick, all work must be stopped until his return."²

Notwithstanding the many drawbacks, during the years that Dr. Bentley was in charge the grounds were very greatly improved, as also the lot of the inmates.

In 1892 the water works of New Westminster were connected with the asylum, the supply coming from Coquitlam Lake, eight miles distant, and for the first time in its history the institution had abundance of water of the purest quality. The change

¹ Statutes of British Columbia, Appendix to 54 Vict., page 342. Annual report on the Asylum for the Insane, New Westminster, B. C., for the year 1890.

² *Ibid.*, page 343.

brought with it also an increased degree of fire protection, as stand-pipes were placed in all the wards and hydrants in the front grounds, furnishing streams of high pressure.

The greatest need now felt in the hospital was that of a better laundry, and this was supplied in the year 1894, when the present brick structure was erected. It was furnished with a cement floor, but had a very faulty dry-room, while the other internal fittings were left in a rather primitive state, no machinery being installed, and the washing being done in tubs by Chinese patients. This, however, has been remedied and the washing is now done by modern machinery.

In 1894 charges of ill-treatment of patients and the excessive use of restraint having been made against the asylum, a Royal Commission, consisting of Drs. Edward Hasell and Charles F. Newcombe, of Victoria, was appointed by the government to investigate them. The evidence, taken under oath, showed the charges to have been only too well founded. Restraint, and that of an unusually severe character, had been freely resorted to in the male wards, not only as a means of preventing violence, but as punishment, while other greater cruelties had been practised.

The methods of restraint or punishment found to be in use were steel handcuffs, steel anklets, leather mitts, leather muffs, leather anklets, pinion straps, camisoles, and "cold ducking." No record was kept of the restraint employed, and attendants resorted to it at will. Patients were reported as sleeping with their hands confined in handcuffs behind them for many nights in succession. Beating with straps was admitted to be a common occurrence, and, according to the patients, the buckle end was occasionally used. Kicks and blows with the fist were frequent incidents of maltreatment.¹

Seclusion was also resorted to, and on this point the commission reported in these terms:

In addition to the so-called broom-closet, measuring about six feet by four feet, in each ward, used, when considered necessary, for the confinement of troublesome patients, there is in the basement cellar a dark cell, made of scantling lined and floored with boards. In this was lying a small piece of matting. It is a very cold place, and near it are places for the

¹ Statutes of British Columbia, Appendix to 58 Vict., report of Royal Commission on Asylum for the Insane.

storage of vegetables and coal. On inquiry, Dr. Bentley at once told us that it had been built and used only for the seclusion of one patient—a Chinaman named Chin Fook Yen—some years ago; that its construction had not been sanctioned by the Provincial Secretary, and that, indeed, he had considered the matter of such small importance that he had not even reported its existence. On examining the steward and keepers, we found that it had been used for at least four other men and one woman.¹

While there was no positive evidence that the superintendent had a knowledge of this sad state of affairs, the commission held that, as such, he should have been cognizant of it. The result was that Dr. Bentley resigned his position and retired from office at the end of the year. Dr. Newcombe was placed temporarily in charge for a month, being relieved on February 1, 1895, when Dr. G. F. Bodington, an English graduate with considerable experience in the care of the insane in the "Old Country," became medical superintendent.

During the year 1895 a new residence for the superintendent was added to the front of the asylum. At the same time the detached building formerly occupied by him was converted into a separate ward for convalescent and orderly female patients, under the name of "Lawn House." An entrance lodge was also built, and electric light introduced into the new structures from the city plant.

Dr. Bodington, although not a believer in the doctrine of complete non-restraint, was utterly opposed to the employment of restraint as a means of punishment, and under his rule its use was greatly lessened, and only the mildest and most humane forms of it resorted to. To bring about this result, much attention was given to the provision of occupation and amusement for the patients. Tailoring and shoemaking departments were organized, farming was pushed as vigorously as possible, and amusements, musical and otherwise, given a prominent place in treatment.

During the years 1895 and 1896 the number of patients was rapidly increasing, and at the close of the latter year the wards were full to overflowing, there being 171 in residence, with accommodation for only 165. The situation was further accentuated

¹ Statutes of British Columbia, Appendix to 58 Vict., report of Royal Commission on Asylum for the Insane, page 511.

during 1897. Dr. Bodington, writing under date of March 24, 1898, said :

Our capacity is nominally 150, but the actual number of patients this day is 212, made up of 175 males and 37 females.¹ We are much overcrowded, and have been compelled to turn the dining rooms into dormitories and to give the patients their meals on the corridors.

Plans for additions were prepared and work begun in the summer of 1897 upon the first of two detached buildings, to be located to the south of the then existing establishment.

Each of these structures was intended to accommodate about 55 patients, and an effort was made to have the appointments along modern lines. Internally they presented some marked contrasts when compared with the old wards. There was a proper day room, large and bright, with a beautiful view from the windows ; there was no dark wainscoting, and the lavatories were tiled and up to date. The 1897 structure was provided with an isolation department for noisy patients, while a corresponding department attached to the building, the erection of which was begun in 1898, was made in the shape of a pavilion.

As soon as the first building was completed in 1898 it was occupied by male patients. The other was finished the next year, 1899, but was not occupied until February 20, 1900. The latter, intended for women, gave great relief to the female department, as it provided two wards for the accommodation of the women who had, up to that time, been housed in one small ward. It further enabled the management to place by themselves those patients who presented some hope of recovery.

At the time that these additions were undertaken, provision was made for one general system of heating, which it was decided should be steam. With this end in view, a central boiler house was located to the rear of the main building, and to secure sufficient fall in the return pipes the boiler room was placed 15 feet below the surface of the ground. Three large safety boilers were installed, while all the coils and radiators in the old building were rearranged to correspond with the system placed in the new ones. Two stories were built above the boiler room, the first of which, on the ground level, afforded quarters for the steward's several

¹ The remarkable disproportion between men and women in this asylum arises from the great disproportion between the two sexes in the province.

store rooms. To the rear of this structure, and attached, was erected a two-story building, the ground floor of which contained a kitchen, scullery, pantries, etc., while the upper story provided a congregate dining room for 250 patients and an amusement hall, with corridors connecting the various buildings running into it.

During 1899 the old amusement hall was remodelled and converted into an infirmary ward, with a large, well-equipped operating room in conjunction. At the same time a brick mortuary was erected at a convenient place in the rear grounds, provided with a well-lighted autopsy room.

It was suggested that the waste steam from the laundry might be utilized to provide power to light the entire institution by electricity. A plant was accordingly installed, but it was found that a much higher pressure of steam would be required to run it than that usually carried in the boilers for heating and working purposes. The plant was therefore made a separate and distinct one.

At the close of the year 1898 there retired from the service an officer who had served the institution, in various capacities, for almost 24 years. This was the steward, James Phillips. He joined the staff as an attendant on March 1, 1875; was made "lay superintendent of the asylum" September 1, 1878, and finally steward on January 1, 1885, retiring at the ripe age of 75 years.

During 1899, the medical superintendent being laid up with a severe illness, an assistant was given him, Dr. G. H. Manchester, formerly assistant superintendent of the Protestant Hospital for Insane, Montreal.

Early in the year 1901 the hospital was visited by Dr. C. K. Clarke, medical superintendent of the Rockwood Hospital (for insane) at Kingston, Ontario, who came under instructions from the Hon. Provincial Secretary's Department to inspect the institution, examine into its workings, and report to the government. After a searching investigation, Dr. Clarke recommended that certain changes should be made with a view to introducing greater economy in the use of supplies, and to make the general plan of management conform to that which had proved most successful elsewhere.

It was apparent that the required changes would entail an immense amount of extra work, and Dr. Bodington, therefore, felt constrained, owing to advancing years, to relinquish the labor

in favor of younger hands, and seek for himself a well-earned rest in the land of his birth. His term of service, extending over six years, terminated February 28, 1901, his assistant, Dr. Manchester, being nominated to fill the vacancy. As his successor in office states in his report for that year, Dr. Bodington's "departure was regretted by all throughout an institution of which he had taken the helm at a very trying time, to safely pilot it through some difficult passages, and that despite the fact that he had never enjoyed robust health and had already arrived at that period of life when men hope to be able to forget labor and worry. His occupancy of the position of superintendent consisted of six years of the most arduous toil, during the greater part of which time he was alone in charge of the institution. In view of the faithful services rendered, Dr. Bodington was voted a retiring allowance by the government."

Dr. Manchester continued in charge of the hospital from 1901 until 1905, and under his regime many improvements to the grounds and the interior of the buildings were brought about. To his urging also, in large measure, was due the setting aside by the government of a plot of 1000 acres of land, situated at Coquitlam, as provision for the erection of a new asylum, which it was evident would sooner or later become necessary.

On the resignation of Dr. Manchester to enter private practice, March 1, 1905, Dr. C. E. Doherty, the present incumbent, was appointed to succeed him.

This year saw the complete abolition of mechanical restraint in all forms, the installation of a hydrotherapeutic plant, and the inauguration of observation dormitories, while in 1906 a pathological laboratory was opened and placed in charge of F. P. Hughes, formerly of the British Enteric and Dysentery Commission.

BRITISH COLUMBIA MENTAL HOSPITAL.

ESSONDALE POINT, COQUITLAM, B. C.

From 1906 to 1908 the admissions to the New Westminster Hospital had increased so rapidly that at the end of the latter year there were 509 patients under treatment. The property, 30 acres in all, was too small to permit of any further extension, so it was

decided to begin work on the erection of a new institution. The site selected, and which has become known as "Colony Farm," was a property consisting of 1000 acres, which had been acquired by the government some years previously. It still remained virgin forest, with considerable low, swamp land, and was situated in the valley of the Fraser River, where it is joined by the Coquitlam River. Tents were secured and some 20 patients from New Westminster housed therein to clear land for temporary quarters, which were completed before the fall of 1908.

In the spring of the following year the clearing of land was begun in earnest, and by the end of the season some 80 acres were ready for the plow. This work was accomplished by about 40 patients, many of whom were excellent axemen, with the assistance of two donkey-engines, manned, with the exception of engineers, by patients. During the winter of 1909 it was decided to push the work of clearing as rapidly as possible. The temporary quarters were accordingly enlarged to accommodate 65 of the best working patients; three more donkey-engines were secured; and in the spring work was recommenced. As Dr. Doherty, medical superintendent, says in a paper read by him on "The Treatment of the Insane in British Columbia," before the American Medico-Psychological Association in May, 1912: "The manner in which our patients took hold of this work surprised me, one patient alone, during one month, handling 17 tons of blasting powder." By the fall of 1910 some 500 acres had been cleared, and all low land dyked and completely underdrained.

In the meantime the provincial government had called for plans for a complete, new institution to accommodate 1800 patients, and had opened a competition into which any and all architects were invited to enter. Prizes were offered for the designs obtaining first, second and third places in the competition, and Franklin B. Ware, State Architect of New York, was appointed adjudicator. The plan awarded first place, prepared by H. S. Griffith, of Victoria, B. C., showed a design for an institution arranged in the corridor-pavilion style, consisting of a central administration unit, behind which and connected by a corridor were a steward's office and stores with service quarters above, the kitchen, bakery, etc., being on the third floor. Separate buildings for the acute and chronic insane, male and female, were arranged in horse-shoe

form, one behind the other, on either side of the administration building, while between it and the quarters for acute cases were situated separate, detached residences for male and female nurses. Convalescent homes and infirmaries, one for each sex, devoid of the corridor arrangement, were located at some distance in front, on either side of the central structure. The laundry, an isolation hospital, a mortuary and a laboratory appeared in the rear on one side, with workshops and an amusement hall on the other. It was specified that all the buildings should be fireproof, constructed of reinforced concrete throughout, and faced with red brick.

In arranging for the drawing of plans there were three points upon which Dr. Doherty insisted for provision in construction; firstly, the isolation and fresh-air treatment of all cases of acute insanity; secondly, provision in both chronic buildings for handling at least 90 per cent of the chronic insane in congregate dormitories; and, thirdly, the provision of proper buildings for manual arts and crafts training, as well as for amusement. Accordingly, the hospital, in its acute buildings, is equipped in such a way that each acute case of an active character can be treated as individually as if he were the only patient in the hospital, while, at the same time, every provision is made for an abundant supply of fresh air and a maximum of sunlight.

The acute buildings contain six large apartments arranged *en suite*, three in each building. Each suite has attached rooms, 15 feet by 20 feet, with lavatory, continuous bath, and pack equipment, two attendants' rooms, and a small diet kitchen. The walls of each apartment are provided with extremely thick, deadened partitions, triple doors and windows. They are also provided with the best obtainable system of forced ventilation. Each apartment can be opened onto a separate compartment of a solarium, when a patient's acute symptoms have begun to subside, and before he is passed along to the regular admission ward.

The congregate dormitories are so arranged that each holds 50 patients, and that two dormitories can, at the same time, be under the constant supervision of a night nurse. They are all artificially ventilated, so that no windows are open; patients have access to the lavatories and fresh water throughout the night, no chambers being allowed. The result of such arrangement is not only an improvement in the general atmosphere of the place and the night

discipline of the patients, but a reduction to a minimum of the dangers which always exist in single rooms or small dormitories only periodically visited.

The workshops are fireproof; all stories have 15 feet of head space, are well lighted on two sides, and provided with the same artificial ventilation as the hospital proper. The recreation hall is large enough to seat one-half the population, while the gymnasium is commodious and fully equipped.

Dr. Doherty is especially proud of the stables and stock at Colony Farm. As stated in the *Farmers' Advocate* of December, 1912, the buildings "are generally conceded to be the best equipped barns, stables, dairy equipment, and yards in Canada." In the buildings "nothing is wanting. Electric lights are available everywhere by the mere turning of a button. Water is supplied where needed, and hydrants are placed in suitable locations for use in case of fire. Yards are asphalted, a bed of four inches of concrete having a two-inch surface of the asphalt. Street sweepers keep the yards clean and a sprinkler keeps down dust. Pipes from the stable carry liquid manure to a large under-ground vat. There are two cow barns. The milking barn does not contain any feed. All feeding material is brought by carrier from an adjacent feed barn as required."

The stock consists of a large herd of Holsteins, all of the purest breed, and many of them record-breakers at agricultural exhibitions throughout the Dominion. The stud is mainly made up of clydesdales, with a proportion of hackneys, a number of each class being prize-winners, not only in this but in the "Old Country."

The hospital was opened for the reception of patients on April 1, 1913, and at the present time (February, 1914) there are some 500 men in residence, no women having yet been admitted.

When fully completed and the grounds properly laid out there can be little doubt that this, perhaps the newest hospital for the insane, will present a fine appearance and be one of the most up-to-date institutions on the Continent.

Under date July, 1913, Dr. Doherty sets the number of British Columbian insane at about 1150, of whom 1020 are under treatment in the public institutions. The total population of the province in 1911 was 362,768.

THE CARE OF THE INSANE IN MANITOBA.

Previous to 1871 there was no provision for lunatics in Manitoba. Amongst the sparse population of the province, while it was yet a part of the old Hudson's Bay Company territory, cases of insanity were few, and these few, so far as can be learned, were generally of a quiet, demented type, and as such allowed to wander about at will, or cared for by their friends and neighbors.

Among the Indians insanity was not at all common. It was usual for them and many of the half-breeds to attribute the origin of this affliction to the action of some evil charm, or the administration of a noxious potion, "Indian medicine," obtained by an enemy from one of the many "medicine men." There was also an implicit belief that if a counter-remedy or charm could be procured from a "medicine man" possessing greater power than he from whom the offending one had been derived, the patient could be quickly cured. On this subject Dr. Young, for 28 years medical superintendent of the Selkirk Asylum, writes as follows:

When I came to this country in 1871 there were few, if any, of the people in Red River settlement who did not firmly believe in the power of the "medicine men" to either afflict or relieve, and I think I can safely say that every insane Indian who has been placed under my care had previously tested the powers of the several aboriginal practitioners. They were only sent to me after the failure of these gentlemen to counteract the "bad medicine" that had been the cause of the trouble.¹

Arguing from this, it seems very probable that some of the comparatively few afflicted were cured by faith; some by the treatment which was not always quite void of value; while the balance, who were not amenable to cure by either of these means,

¹The late Dr. Geo. M. Dawson, director of the Canadian Geological Survey and probably one of the best posted men on the Northwest and all pertaining thereto, informed the writer that his experience of "medicine men" was rather to the effect that they depended upon mysterious ceremonies, dancing, singing, etc., than upon potions of any kind. He also stated that in the case of idiots the Indians seemed to tend them somewhat carefully and to regard them as bringing luck in some way.

succumbed to the successive ministrations of the rival "medicine men." There was little need, therefore, in the early days of the Hudson's Bay Company to make any provision for the chronic insane.

Cases of acute mania, especially if violent, were often got rid of in a much more speedy manner. Those so afflicted were supposed to be possessed by a cannibal spirit or "Windigo," and being thus a menace to the other members of the tribe, were promptly shot or otherwise disposed of without ceremony. Even within comparatively recent years a case of this kind occurred near Battleford, Northwest Territory, an Indian being sent to the penitentiary for life on account of having killed one of his female relatives in the belief that, being insane, she would devour some of the other members of the family.

In 1871, during the regime of Lieutenant-Governor Archibald, the Dominion Government established the Manitoba Penitentiary at Lower Fort Garry (Stone Fort), 20 miles north of Fort Garry, now the city of Winnipeg. One of the old stone store houses of the Hudson's Bay Company, previously used for the confinement of Lepine, Adjutant-General to the notorious Louis Riel, and some of his fellow rebels, was fitted up for penitentiary purposes, and here, from 1871 to 1877, the insane were cared for.

In 1877 the convicts were removed to Stony Mountain, where the present penitentiary had been erected, the lunatics then in custody being transferred with them.

Up to this time only such of the insane as were considered dangerous were confined, and there had never been more than three or four in residence at one time. Except in the case of females, no separate provision was made for lunatics, they and the convicts being treated as one. About two years after the removal, however, an order-in-council was passed that all cases of insanity arising in Manitoba and the Northwest territories should be admitted and cared for in a portion of the building apart from the convicts. Naturally, under this new regulation, the number of the insane in the penitentiary increased rapidly, and in 1883 it was recognized that other provision for this unfortunate class must be considered. The provincial legislature accordingly passed an act authorizing the building of an asylum and providing for the proper care of the insane.

While steps were being taken to put this act in force, the Dominion Government, in 1884, notified the provincial authorities that they must remove the lunatics from the penitentiary without delay. The new asylum not being completed, temporary accommodation was made for them at Lower Fort Garry, where their old quarters, the former penitentiary, and another building were arranged for their reception. These structures were occupied in February, 1885, by 35 patients, 27 men and 8 women, transferred from the penitentiary at Stony Mountain. Dr. David Young, a graduate of Queens University, Kingston, Ont., who had been appointed such on June 1 of the previous year, was the first medical superintendent, and ably filled the position under many trying circumstances up to March 1, 1912, when he resigned after over a quarter of a century's service on superannuation allowance, being, in addition, made consulting physician to the provincial hospitals for the insane. A successor to Dr. Young was nominated on the date of his resignation in the person of Dr. J. B. Chambers, who still continues to fill the office.

Immediately after his appointment as superintendent Dr. Young was instructed by the late John Norquay, Premier of the province, to visit a number of the asylums in Eastern Canada and the United States so as to get a practical experience of the proper management and equipment of institutions of this kind.

SELKIRK ASYLUM.¹

SELKIRK, MAN.

The site selected for the new institution was at the town of Selkirk, located on the Canadian Pacific Railway, six miles from the old Stone Fort, and a mile west of Red River. The cornerstone was laid by Sir Hector L. Langevin in June, 1884, and on May 25, 1886, the building being ready for occupation, 59 patients, 44 men and 15 women, were moved into it. The institution was substantially built, with solid brick walls and partitions, and stone foundations up to the ground floor. Its capacity at the date of opening was 167.

¹In 1910, after much solicitation on the part of Dr. Young, the Legislature saw fit to change the appellation of asylum to hospital. The official title of the institution is now therefore "Selkirk Hospital for the Insane."

Overcrowding was soon the order of the day, and in 1888, in spite of the fact that the south wing of the edifice had been completed and occupied in that year, the patients from the Northwest Territory and Keewatin, consisting of 13 men and 8 women, who had been received by an arrangement with the Dominion Government, were re-transferred to Stony Mountain.

In 1890, to still further relieve the congestion, some 17 harmless patients, 12 men and 5 women, of the imbecile class, were removed to the Home for Incurables, opened in June of that year at Portage La Prairie.

The temporary relief thus obtained was soon exhausted owing to the rapidly increasing population of the "Prairie Province," and in July, 1891, 24 patients were sent to Brandon Asylum, the erection of which had been begun the previous year.

The year 1896 saw the erection of a new combined outside amusement hall and chapel, the space thus freed being converted into dormitories to accommodate 45 additional patients. There was still lack of room, however, and in the report of the Department of Public Works for 1900 we find the provincial engineer complaining bitterly of the want of accommodation for the insane in the following terms: "The accommodation of the asylums at Selkirk and Brandon is taxed to its utmost capacity. The Home for Incurables is filled, and applicants are waiting their turn for admission. Increased accommodation in the above institutions is absolutely necessary." This statement is emphasized by the superintendents of the establishments referred to, whose reports are included in the same brochure.¹

Of the structure as originally designed, only the south wing and a part of the center building had been completed at the time of occupation, and, to increase the capacity of the asylum, it was determined to finish and augment the size of the latter. The work of excavation for foundations was begun on July 1, 1902, and by November the new structure was roofed in, being occupied early in 1903. This addition perfected the center building and provided housing for 93 more patients. It was four stories in height, including the basement, and finished off to correspond

¹Up to 1887 the asylum system of the province had been under the jurisdiction of the Attorney-General. It was then placed under that of the Department of Public Works, where it still remains.

with the other parts of the institution, the basement being of native limestone and the superstructure of white brick with red facings. On the first floor were located the offices and reception rooms, with accommodation for 35 female patients; the second floor contained the officers' quarters and rooms for 23 patients; the third story had accommodation for 35 male patients. The design was the work of Mr. S. Hooper, while the contractors were Messrs. Wood & Mitchell. A new power house, laundry and stable were also erected during the same period.

This addition was a great boon, as set forth by Dr. Young, who says in his annual report:¹

A point of great importance is the improved classification that will result, as the new wards can be completely shut off from the others. The basement will be used for officers' dining room, sitting room, cold storage, work shop and storage room. There will also be a large tank for soft water under the cold storage room. There is an iron stairway from basement to attic. The attic is large, roomy and well lighted. On the east side there is a veranda, 40 feet long, closed in with glass in the winter and with mosquito netting in the summer, which will be greatly appreciated by the lady patients. Provision is thus made for those requiring treatment in the immediate future, but, if the population of the province increases as rapidly as we expect, it will not be long till it will be necessary to add another wing.

Dr. Young's prediction as to the need for additional room was verified more speedily than even he had anticipated, and in his report for 1904 we find him writing as follows:² "All our beds are now occupied and it has again become necessary to accommodate some patients with cots on the corridors. Till the new building at Brandon is ready for occupation there will be the greatest difficulty to provide for those that require treatment." Again, in his report for 1909 he says:³ "The accommodation has been taxed to the utmost to provide for those needing care and treatment. The large increase in the number of patients is due entirely to the great increase in the general population, not only in this province, but in Saskatchewan and Alberta. The asylums at Selkirk and Brandon now accommodate all the insane from the country between the western boundary of Ontario and

¹ Report of the Department of Public Works for the year 1902, page 25.

² Report of the Department of Public Works for the year ending December 31, 1904, page 16.

³ *Ibid.*, for the year 1909, page 25.

the eastern boundary of British Columbia, containing a population estimated at over 1,000,000. The ratio of insane to the general population has increased very little in late years, and is very much lower than in the east and south, or in older countries."

To meet this pressing state of affairs, in 1909 plans were prepared to complete the original design by the construction of the north wing, and a contract for the work was awarded to Messrs. Thomas Kelly & Sons, of Winnipeg. Plans were also gotten out for a new cold storage building and a power plant. Ground was broken at once, and by December, 1911, the new wing was so far advanced that the patients were able to occupy it. It was a three-story structure, with basement and attic, made as nearly fireproof as possible, and in design was a continuation of the parent edifice. Underneath the basement a tunnel, extending the whole length of the building, was connected with each corridor and room by flues. By this means fresh air, after being heated by passing through tempering coils, was forced to every part of the building by an electrically driven fan, the foul air being sucked up and forced out above the roof by another fan located in the attic. By this addition room was provided for 180 additional patients at a cost of about \$180,000.

A further addition was made to the rear of the central portion of the main building in the years 1913 and 1914. This consisted of storage rooms, kitchen, male and female dining rooms, and two hospital wards with sun galleries, one for men and one for women. A detached brick morgue, 18 feet by 14 feet, was also provided, the estimated cost of the whole being about \$125,000.

Roughly speaking, as it now stands the general layout of the Selkirk Hospital is the time-honored one of a central administration building, four stories in height, with wings extending to the north and south, each three stories high above the basement, and each story on either side embracing a ward. The stores, kitchen, hospitals and dining rooms, of which there are six, two for women and four for men, are in rear of the central portion of the structure. The water supply, which is ample, is obtained from a well 275 feet deep sunk on the premises; the heating throughout the establishment is steam and the lighting electric; sewage is carried to the Red River; the medical superintendent has a separate residence, built in 1891. The present population of the institution is 356 and its capacity 450.

BRANDON ASYLUM.

BRANDON, MAN.

Work on Brandon Asylum, now the Brandon Hospital for the Insane, was commenced in 1890, the building being opened in July, 1891. The establishment, a brick and stone structure, was very similar in design to that at Selkirk. The internal construction, however, was much inferior, being very far from fire-proof. In evidence of this we have the report of the government engineer for 1900, wherein he speaks of it to the following effect: ¹ "The division walls on the wards are of ordinary studding and lath and plaster, with narrow baseboards, while the floors are not watertight, so that any nuisances committed affect the ceilings below; the plumbing throughout is bad and the water closets defective; the fire protection and water supply, as well as the heating, are also quite inadequate."

The site selected was on the north bank of the Assiniboine River, near Brandon, a city located on the Canadian Pacific Railway, toward the western border of the province. For scenic beauty it was well chosen, commanding as it does an extensive view of the river valley and the city.

The institution was first placed in charge of Dr. Gordon Bell, who was appointed medical superintendent in 1891, and continued in office up to 1895, when he resigned to enter private practice at Winnipeg. Dr. Bell was succeeded by Dr. N. B. Gillies. He in 1900 gave place to Dr. J. J. McFadden, who had charge up to 1903. In the latter year Dr. J. J. Anderson assumed the duties of office, his reign extending up to 1909, when Dr. McFadden again took up the government, which he still retains.

Before it had been opened two years the hospital was much overcrowded, and in 1902 we find the then superintendent, Dr. McFadden, reporting as follows: ²

The necessity for providing more and better accommodation for the reception of patients at the Brandon Asylum must be apparent to anyone who during the past year has visited the institution. With a daily average of 266 patients for the year 1902, the natural increase as the country becomes more densely populated, and the prospect of an unusual immigration during 1903, I am of opinion that either new buildings should be erected or additions made to the present one.

¹ Report of the Department of Public Works for the year 1900, page 24.

² *Ibid.*, for the year 1902, page 34.

In the erection of such building or buildings due regard should be given to the comfort, welfare and treatment of the patients, by which I mean that more single rooms are required, a proper system of ventilation is without doubt indispensable, and provision should be made for an operating room, the use of which would relieve the suffering of many an unfortunate. The new addition or buildings should also be so planned that patients could be properly classified, giving some regard to those patients whose friends are desirous of having them placed in a private ward, and paying therefor an extra sum.

Acting on this report, in May, 1903, tenders were asked for the erection of an addition, to cost about \$90,000, and before the arrival of winter the foundations were in and the walls carried up to the ground level. The construction of a sewer from the asylum to the river, a long-felt want, was also got well under way, being completed in 1904, as was a new fireproof boiler house. The additional wing, to house 150 patients, was finished, furnished and occupied early in 1905.

In 1908 again came the cry for more room, the assistant medical superintendent, Dr. J. B. Chambers, reporting as follows:¹

The normal sleeping capacity of the institution for patients is 420 beds. As our population is now 557, this means that we have 137 more patients than we can normally accommodate. They are disposed of in the female wards by crowding the existing dormitories to the extent of 40 beds additional, and by placing 8 beds on stair landings and in halls; and in the male wards by placing 67 beds in the assembly hall at the top of the new building, by making 10 beds on the floors of the day sitting rooms, and by crowding existing dormitories to the extent of 12 beds additional. To relieve this congestion something should be done, either in the way of building a superintendent's residence, which would make available the quarters now occupied by him in the new building, and by the erection of two or more cottages, or by the building of an administration building as suggested by my report last year.

To remedy this regrettable state of affairs, in 1909 a residence was built for the superintendent, his old quarters being converted to the use of patients, but in spite of this there were more than enough admissions to fill all the vacant beds in the institution.

On the evening of November 4, 1910, the entire hospital was destroyed by fire, the origin of which could not be discovered. Fortunately the disaster was not attended with any loss of life or injury, although the night was a bitterly cold one. The

¹ Report of the Department of Public Works for the year 1908, page 27.

Winter Fair building was at once placed at the disposal of the government by its directors, and the patients temporarily but comfortably housed therein, while plans were immediately got under way for a new hospital, to be of fireproof construction throughout, with pressed brick and cut-stone walls, metal roof, iron stairways, elevators, and fully equipped for hospital purposes with the most modern plumbing, ventilating and heating, the last to be supplied from a power plant apart from the hospital buildings, pipes passing thereto through a tunnel. It was designed to have a frontage of 425 feet with two additional wings, and to be three stories high with basement. Accommodation was to be provided for 1000 patients at an estimated cost of \$1,000,000. The work of erection was begun early in the spring of 1911, and on December 2, 1912, the patients were moved from the Winter Fair building to their new quarters. The formal opening was held in February, 1913.¹ The present population is 485.

HOME FOR INCURABLES.

PORTAGE LA PRAIRIE.

This institution, located at Portage la Prairie, a town some 50 miles west of Winnipeg, was opened in June, 1890. It was not really intended for mental cases, but owing to the lack of room in the Selkirk Asylum, there were transferred to it therefrom, on its opening, some 17 quiet patients of the idiotic type. This action, combined with the fact that imbeciles and idiots are by law non-admissible to the insane hospitals, has led to the adoption of a part of it ever since as a refuge for harmless patients of these classes.

Like the insane institutions, it was speedily filled, and we find Dr. S. B. Cowan, attending physician, stating as follows, in his report for 1901:²

Last year I drew your attention to the matter of the institution being overcrowded. It is still more so this year. The number of patients at

¹ At the same time there were constructed a fireproof stores building, with an area of 32 feet by 62 feet; a laundry covering an area of 60 feet by 94 feet, also fireproof; a morgue 14 feet by 20 feet, and five one-story cottages for the use of employees.

² Report of the Department of Public Works for the year 1901, page 45.

the end of the year was 108, and this year it is 115. By still crowding in more beds we might admit three or four more. This state of affairs cannot go on much longer, and it is evident that the building is too small. At present we have about 35 idiots in the building. The result of this is that a part of the building is rendered insanitary through its proximity to them. I cannot speak too strongly against this arrangement, and think it should be remedied as soon as possible. If a separate building were erected for these patients it would correct the trouble, and also give us more room for other patients.

To relieve the overcrowding, the erection of a new wing to shelter 69 patients was determined upon, the work being completed in 1905.

Despite this substantial increase in room, we find the superintendent, Mr. W. P. Smith, in his report for 1907¹ calling for more in the following words:

Although it is only a little over two years since the new wing was added, our institution is crowded to its utmost capacity; and I would suggest that the superintendent have a separate residence, and his present apartments be used to relieve the crowded situation.

This suggestion was acted upon during the following year.

In 1908 plans were prepared for the construction of an "old folks' home," to be run in connection with the Home for Incurables, which had become so overcrowded as to necessitate the rental of a neighboring cottage for the overflow. Work thereon was begun, the structure, after much delay, being occupied on December 4, 1912. The building, four stories in height, was of solid brick and stone and reinforced concrete construction.

Though improved by this welcome addition, the condition of the idiots still left much to be desired, and we find Dr. H. A. Gordon, attending physician, complaining of this as follows, in his report for 1913.²

The building at present occupied by the idiots and imbeciles is certainly inadequate to accommodate these patients properly, and it will be absolutely necessary that the government at once provide a suitable building or buildings for housing these patients. This should be done with a view to properly segregating the different types of these diseases as far as possible, as well as providing for the highest degree of sanitation.

Whether Dr. Gordon's ideas will be carried out, and if so, how soon, remains to be seen.

¹ Report of the Department of Public Works for the year 1907, page 56.

² *Ibid.*, for the year ending November 30, 1913, page 111.

From the foregoing it will be seen that the two hospitals, Selkirk and Brandon, have accommodation for 1500 patients, while their population at the present time is only 841, a rather unusual and enviable position for an asylum system to be in. This condition was brought about by the opening of the Alberta and Saskatchewan institutions in 1911 and 1914 respectively, and the removal of their patients, who up to those years had been cared for in the Manitoban hospitals. However, with the development and settlement of new territory by the expected influx of immigrants it will probably be only a few years before the old, well-known cry for new buildings will appear again in the annual reports.

The system of management in the Manitoban asylums is similar to that in use in Ontario, they being under the supervision of an inspector, who is directly responsible to the government. Both institutions are conducted on non-restraint principles, and in both agricultural pursuits form the chief mode of employment. Patients from the Yukon and Northwest territories are no longer accepted, British Columbia taking charge of the former, and the Ponoka and Battleford asylums, of Alberta and Saskatchewan respectively, of the latter.

Every person admitted who is in a position to do so or has relatives liable and financially able has to pay for maintenance. In the case of destitute patients the province pays all expenses. No difference is made in any respect in the care and treatment of the two classes. Patients from the still unorganized portion of the province (formerly Keewatin) and all treaty Indians are paid for by the Dominion Government.

THE CARE OF THE INSANE IN NEW BRUNSWICK.
PROVINCIAL HOSPITAL.
ST. JOHN, N. B.

To New Brunswick is due the honor of having been the first of the old British North American provinces to make special provision for its insane.

While the population of the province was yet sparse and the insane but few in number each county cared for its insane as best it could, the law authorizing "any two justices of the peace to issue a warrant for the apprehension of a lunatic or mad person, and cause him to be kept safely locked in some secure place, directed and appointed by them, and, if they deemed it necessary, to be chained."¹ Under this law the indigent insane were confined in jails and poorhouses, while those able to bear the expense were sent abroad.

In the early thirties the lunatics in county institutions had increased to such an extent, and at the same time there were so many others scattered throughout the province whose friends were desirous of having them cared for, that it became absolutely necessary to make some proper provision for their accommodation. We find, accordingly, from the minute books of the old Sessions of the Peace that at the session held on the first Tuesday in September, 1835, a committee was appointed to prepare a petition to the Legislature "for the passing of a law for the better providing for and securing of lunatics within the province." On the first Tuesday in December following, the mayor submitted the draft of a petition for the establishment of a provincial lunatic asylum, as prepared by this committee. It was read, approved and handed to Mr. Robinson, M. P. P., to present.

N. B.—For much of the material embodied in this sketch credit is due to Dr. J. V. Anglin, medical superintendent of the Provincial Hospital at St. John, N. B., it being the product of his untiring researches into early documents.

¹ Appendix to Journals of House of Assembly of New Brunswick, 1875. Report of the medical superintendent of the Provincial Lunatic Asylum for the year 1874.

As a result of this action, we find in the Journals of the House of Assembly, which House, by command of the Lieutenant-Governor and Commander-in-Chief of the Province, Major General Sir Archibald Campbell, Baronet, G. C. B., met at Fredericton for the despatch of business on the 20th of January, 1836, the earliest reference by its law-makers to an institution especially devoted to the care of the insane of the province, although that was the third session of the Eleventh New Brunswick General Assembly. The first recorded mention of an asylum in the House was on Friday, 29th January following, when Mr. Robinson, by leave, presented a petition from the justices of the peace for the County of Saint John, praying that an act might pass for the building and providing for a provincial lunatic asylum. A petition to the same effect, also by leave, was presented by Mr. Weldon, M. P. P., from John Wheaton, George Pagan, Esquires, and others, magistrates and inhabitants of the County of Kent. These were read and it was ordered that they should be received and laid on the table.

Later in the day Mr. Robinson moved for leave to bring in a bill for the establishment of a provincial lunatic asylum, and, leave being granted, the bill was brought in and read a first time. It was read for the second time on February 1, and on February 6, the House went into committee of the whole upon it, with Mr. Weldon in the chair of the committee. The chairman, reporting progress, asked leave to sit again, which was granted.

On February 11 Mr. Robinson moved "That the House do now resolve itself into committee of the whole, in further consideration of a bill for establishing a provincial lunatic asylum,"¹ whereupon Mr. Weldon moved in amendment "That the further consideration of the said bill be postponed until the next session of the General Assembly."² The amendment being carried, Mr. Weldon introduced the following resolution:

Resolved, That an humble address be presented to His Excellency, the Lieutenant-Governor, praying that His Excellency will be pleased to appoint commissioners to ascertain the most eligible site near the City of St. John for a provincial lunatic asylum, together with a plan of the same and an estimate of the probable cost of land and the erection of such buildings,

¹ Journals of the House of Assembly of New Brunswick, 1836.

² *Ibid.*

etc., as may be required for the same, and also any information they may be able to obtain relative to the management of similar institutions.¹

Mr. Weldon, Mr. Harrington and Mr. Robinson were named as a committee to wait upon His Excellency with the address, the result being that Messrs. Charles Simonds, John Robertson, W. H. Street, Thomas Barlow, Thomas Paddock and the Rev. Frederick Coster were appointed commissioners to select a site for a permanent asylum, prepare a plan of the proposed structure, and estimate the probable cost of land and building.

The case, however, was too urgent to await the shilly-shallying action of the Legislature; consequently, as a temporary expedient, at the suggestion of Dr. George P. Peters a small wooden building in the City of St. John, originally erected as a cholera hospital in 1832, was converted into an asylum for lunatics. For a description of the structure we are indebted to a letter of Dr. Peters', dated November 28, 1836. Herein it is stated:

The lower part of the building has been divided into two sides, one for the males and the other for the females. For the purpose of separating as much as possible the more violent from those who appear inclined to conduct themselves in a moderate way, these sides have been subdivided: the male side into a day room (if a mere passage can be so called) and five sleeping rooms; the female side into a similar day room and four sleeping rooms.

This institution, the first of the kind in Canada, was situated on Leinster Street, at the corner of Wentworth Street, in rear of the Centenary Church, and not far from the present jail premises.² It continued in operation for a little over 13 years. The date of its opening was November 14, 1835. For evidence of this we have the old minute books before referred to. From these we learn that at the June session, 1836, the grand jury reports having

¹ Journals of House of Assembly of New Brunswick, 1836.

² Mr. G. F. Matthew, of St. John, the distinguished scientist, and a son of the Mr. George Matthew who did such excellent service for the care of the insane in New Brunswick, and was the original superintendent of the establishment, writes as follows under date October 14, 1905:

"The frontispiece of your brochure ('Canadian Institutions for the Insane') recalls ancient memories. The old lunatic asylum was a familiar recollection of my childhood. We lived but a few blocks from it, and I have been more than once inside the high fence that enclosed it, and well remembered how frightened I was at the mutterings and declaiming of its unfortunate inmates."

visited the jail, the poorhouse and the lunatic asylum, and having been much gratified with the inspection; while at the session of March 14, 1837,¹ mention is made of the "lunatic accounts," with this memorandum: "These comprise the whole expenditure on lunatics in this parish (St. John City), as well as those received from the parishes of Carleton, Lancaster and Portland, from November 14, 1835, to 31st December, 1836." The sum stated is £695 6s. 10d., nearly half of which sum was incurred in necessary improvements and in furnishing the hospital to adapt it to its new uses. Additional evidence of the date of opening is afforded by the fact that among the appropriations by the House of Assembly, in 1837, appears the following:

To the justices of the peace of the City and County of St. John, £600 to reimburse the overseers of the poor of the said city for expenses incurred in providing and fitting up a temporary asylum for lunatics and for the support of lunatics in the same from the 14th day of November, in the year 1835, to the 31st day of December, in the year 1836.

Up to toward the close of the year 1843 the establishment was under the charge of Mr. Geo. Matthew, then overseer of the poor, with Dr. Peters as visiting medical officer. In that year it was first styled the Provincial Lunatic Asylum, and was placed in the care of a board of commissioners consisting of Wm. Jack, Esq., George Matthew, Esq., and Dr. Peters. The last named acted also as medical superintendent. This board, on which John Ward, Esq., Jr., replaced Mr. Matthew in 1844, continued in charge of the institution up to its close.

During the first 13½ months of its existence, namely, from November 14, 1835, to December 31, 1836, 31 inmates were admitted into the temporary asylum. When abandoned in 1848, 652 patients had received the benefits of its treatment. A record preserved in the sessions of the peace minute book states that up

¹ At this session a report was received from Mr. George Matthew, giving a history of the asylum and its progress to that date. Unfortunately this report was not put on the minutes and is not discoverable, in spite of a careful search of the vault in the clerk's office made by Mr. W. K. Reynolds, of St. John, and others. It is probable that this, with many other old and valuable documents, was stored somewhere outside the vault at the time of the great fire of 1877, and that it was then destroyed.

to the 31st of December, of the 31 admissions "there have been discharged: cured, 6; improved, 5; to friends not improved, 2; died, 4. Of the remaining 14, 1 is much improved, 2 perceptibly improved and 11 without any visible improvement." From the same source we can judge that more or less restraint was employed in the institution, inasmuch as Mr. Matthew, in submitting some accounts, remarked that these were for actual expenses attending the keeping, and that no allowance was made for destruction of house, or for furniture, including straight jackets. In addition to restraint, some of the details of the itemized accounts, as witness the following, are highly suggestive of the times and of the methods of treatment, in which blood-letting must have played a considerable part, and baths and light must have been luxuries:

W. McBay, for 12 hogsheads of water (for one month), £1, 15 shillings.

W. Hammond, for 30 pounds rush lights, 10 pence per pound, £1, 5 shillings.

Harris and Allen, for 8 tin bleeding cups and 1 tin pan, 7 shillings and 6 pence.

D. Collins (saddler), for 3 hand mufflers, £1, 15 shillings.

G. T. Ray, for 12 straight waistcoats at 20 shillings each, £12.

This asylum was justly considered an improvement on the jail and poorhouse plan of caring for the insane, but was ultimately found altogether inadequate to meet the wants of these unfortunates.

A little over a year after the opening of the temporary asylum, namely, December 2, 1836, the commissioners appointed for the purpose presented an exhaustive report, the work of the Rev. Mr. Coster, concerning the erection of a fitting asylum. It embraced all the subjects referred to them for consideration. It computed the number of lunatics in the province to be 130, not 50 as was at first supposed, or 1 in every 1000 of the population, and recommended as suitable sites either Poverty Hall, about six miles northeast of the City of St. John, or South Bay, a few miles up the St. John River. It estimated the cost of buildings at about £8000, furniture £2000, and land from £700 to £1500, according to the quantity purchased, and dealt with questions of maintenance, amusement, religious instruction and possibilities of cure.

Accompanying the report was a plan for the proposed structure, a modification of the Asylum at Worcester, Mass.¹

This report was laid before the House by the Lieutenant-Governor, through the Hon. Mr. Baillie, a member of the Executive Council, on December 27, and on motion of Mr. Johnston it was "Ordered, that 150 copies thereof be printed for the use of the Legislature."

On the 10th of February following (1837) it was ordered "that the report be accepted," and resolved, "that it be referred to the Committee of Supply."

The customary squabbling as to the selection of a site seems to have at once begun, each member of the House who had "an axe to grind" advocating his own views. The result was that seven days later Mr. Johnston moved the following resolution, which was carried:

WHEREAS, In pursuance of an address to His Excellency the Lieutenant-Governor at the last session commissioners were appointed to ascertain the most eligible site near the City of St. John for a provincial lunatic asylum, and to prepare a plan of the same, and an estimate of the probable cost of land, and the erection of such buildings as may be required for such purpose; and,

WHEREAS, The commissioners have given the information sought for, but doubts are now entertained by the House whether the climate in the neighborhood of St. John is well adapted for such an establishment, and whether a building on a smaller scale, and consequently at much less cost, could not be erected, and land procured on the St. John River or some other place in the province containing all the requisite qualifications for such an establishment; therefore,

Resolved, That the commissioners already appointed be requested to extend their enquiries for a site to the said River St. John, and other parts of the province, and have plans prepared for a building suitable to the state of this colony—the estimated cost of which shall not exceed £3500; and that they report the result to His Excellency the Lieutenant-Governor, to be laid before the Legislature at the next session.²

The first session of the 12th General Assembly began on December 28, 1837. It was summoned to meet thus early in the winter because of the rebellion in Lower Canada, and the sympathy therewith manifest on the United States frontier. In addi-

¹ See Appendix A from Journals of House of Assembly of New Brunswick, Appendix No. 3, 1836-37, with accompanying letters.

² Journal of the House of Assembly of New Brunswick for the session from December 20, 1836, to March 1, 1837.

tion, it is to be noted that, because of the King's death, there had been a general election in 1837, and some new members, non-conversant with the asylum question, returned to the House.

On January 22, 1838, Mr. Partelow presented a petition from the justices of the peace of the City and County of St. John, praying to be reimbursed for expenses incurred in the support of the temporary asylum during the previous year, and on February 20 they were granted £1181 2s. 3d. to remunerate them for money advanced and actual expenses incurred. Mr. Partelow also laid before the House reports from Dr. Peters, visiting medical officer, and Mr. Geo. Matthew, principal governor and superintendent of the institution. Both of these documents¹ are extremely interesting as throwing much light upon the then existent conditions, the benefits that had accrued from the foundation of even a temporary asylum, the pitiable condition of many of the cases received, the lack of proper keepers, the class of patients admitted, the prevalence of contagious bodily diseases, and the cost of maintenance and improvements. Special attention is also called by Dr. Peters to the number of cases of delirium tremens to which shelter was given. These, which constituted no less than 23 per cent of the total admissions, were not regarded by him as properly insane, and consequently are not included in his table of classified admissions. In his next annual report, however,² laid before the House during its 1839 session (as well as in subsequent ones), he seems to have changed his views and we find the cases of this disorder included in the total of 50 in residence at the close of the year 1838.

On March 9, 1838, yet another address was presented to His Excellency the Lieutenant-Governor, now Major General Sir John Harvey, Mr. Woodward moving that he be prayed "to appoint commissioners to select the best site for a provincial lunatic asylum, either in the vicinity of the City of St. John or Fredericton, or any part of the River St. John, and to furnish a plan of a suitable building for the above purpose, the estimated cost of which, including the land, shall not exceed £4000."³

¹ See Appendix B from Journals of the House of Assembly of New Brunswick, 1838.

² Journals of the House of Assembly of New Brunswick, 1839.

³ Journals of the House of Assembly of New Brunswick, 1838.

Little or nothing seems to have been said or done regarding the provision of a permanent asylum from 1838 up to 1845. The journals of the House, however, almost the only source of information, contain various items regarding petitions for the granting of supplies for the up-keep of the temporary asylum, as well as reports from its medical officer and superintendent. In these there is much of interest. For example, Dr. Peters, in his fifth annual report, made in 1841, states as follows :

May it please Your Excellency: During the first year of the establishment of this institution, 24 patients were admitted, many of them taken from the gaols throughout the province, and most of them from situations least likely to admit of their recovery. During the past year, however, no less than 72 have enjoyed the benefit of this establishment, 15 of whom have been discharged cured, and 8 dismissed very nearly recovered, but who nevertheless cannot with propriety be pronounced cured, as they had not gone through the usual test of six weeks' probation—a period considered absolutely necessary to establish a confirmation of the cure, and which was only prevented by the importunities of friends who are naturally always anxious for the discharge of those most dear to them, and beg so piteously for their release, that it is next to impossible to refuse them. . . . Owing to the very great vigilance of the keepers, there have been no casualties among the inmates from violence during their paroxysms; one unfortunate fellow, however, in his desire for a little novelty, climbed up to the straw loft, and by some unlucky chance tumbled down and broke his leg; he is now, I am happy to state, quite recovered. We had likewise one attempt made to burn up the establishment by a woman who managed to conceal some combustible materials, and after all were in bed made an ingenious use of the articles to ensure a good fire, but fortunately one of the keepers discovered the flames in time for a bucket or two of water to prevent further mischief.¹

Again, as regards the benefit of treatment, Dr. Peters says, in a report presented to the House, February 1, 1844: "I am happy to have it in my power to show that this institution, though exceedingly limited in the means for the proper treatment of the insane, will bear no mean comparison with others more highly favored," and records that on December 31, 1843, there were in the asylum 52 patients, while 47 had been received during the year, making a total of 99. Of these cases, 60 were old (or of more than six months' standing previous to their admission), while 39 were recent. Of the former, 12 were discharged as

¹ Journals of the House of Assembly of New Brunswick, 1841. Report of Dr. Peters.

cured, and of the latter, 25—a valuable commentary on the advantages of the early treatment of mental disorders.

Further on in his report the doctor states, with reference to injuries received by patients, applications for admission, employment, and last, but not least, the present burning question of deportation, as follows:

One patient jumped from a third-story window, fractured both arms and dislocated the elbow joint, but we managed to keep her quiet afterwards, although she had previously been exceedingly violent, and made a good cure of her case in a few weeks.

A young lad of 16 came to the gate and demanded admission, followed by his father, who grieved exceedingly at his determination to go to the asylum from a very common but false impression that confinement there was a disgrace. He was in hopes that his son would relent and wish to go home with him as soon as he had seen the interior of the establishment, but in this he was disappointed. He persisted in staying there, as he said he knew it was the only place where he had a chance of recovery, and he felt quite sure that if he remained out he would destroy himself, as he had several times threatened to do already.

One incurable, belonging to Scotland, we sent home, as the cost of his passage was a small amount compared to what his maintenance would have been here for years.

Much work has been done by the inmates during the past year for the institution. We have had a tinsmith, who has made tinware enough to last us for a year to come. Indeed, whenever we get a mechanic we make the most of him for the benefit of the establishment, as his occupation is not only useful to us, but also the best means of promoting his own recovery.

I cannot close this report without complaining of the common custom of sending patients to the asylum without any clothing but that on their backs. I can make no exception in favor of any of the counties, for they come to us in this state from every part of the province, and sometimes in perfect rags. Where a parish is relieved from a charge of this kind, care should be taken that the unfortunate lunatics have at least a change of clothing, but the general practice of neglecting to do so very materially increases our expenses for clothing.¹

In the course of the same session there was presented to the House a report from the commissioners of the temporary asylum, with estimates for the current year. In this it is shown that the Legislature, as is common with legislatures even at the present day, was somewhat dilatory in the payment of its bills, and that

¹ Journals of the House of Assembly for New Brunswick, 1844. Report of Dr. Peters.

the members of the commission had personally been obliged to advance money to cover expenses, about which they had justly complained in the following words:

Having already transmitted before in this month (by the hands of our Dr. Peters) the account and vouchers for the quarter ending at 31st December last, showing a balance £93 16 shillings 6 pence then due to the commissioners, we would now respectfully urge attention to this peculiar state of the accounts of the institution, presently subjecting the commissioners to the necessity of raising means on their own private account, not only for paying off a considerable portion of the bills of the last quarter, but also to meet the current expenses of the present. Not doubting, however, but that an early remedy will be found for this inconvenient state of affairs, we have the honor to remain.¹

Interesting also in the extreme are the estimates of the sum required for the yearly support of the asylum, and the dietary, as supplied by the commissioners in the same year. Viewed at the present date, the rate for maintenance, three shillings and three pence (about 80 cents) per week, and the diet furnished, as shown in the subjoined tables, would seem almost absurd.

Diet, ordinary and extra, for 70 individuals during the year,			
each 52 weeks at 3s. 3d. per week, for which rates see	£	s.	d.
diet table annexed	591	10	0
1344 lbs. soap at 3d.	16	16	0
200 lbs. candles at 8d.	6	13	4
60 gals. Pale Seal oil at 3s. 6d.	10	10	0
250 lbs. tobacco at 6d.	6	5	0
4 tons straw at 45s.	9	0	0
3 tons hay at 55s.	8	5	0
Bran and other short feed, say.....	6	10	0
30 chaldrons coals at 20s.	30	0	0
60 cords fuel wood at 10s.	30	0	0
Rents, say	40	4	0
Salaries, doctor and keepers	180	0	0
Bed and body clothing	250	0	0
Miscellaneous	100	0	0
	1,285	13	4
Allowance to the commissioner immediately superintending,			
purchasing supplies, keeping the accounts, etc., say	100	0	0
	1,385	13	4

¹ Journals of the House of Assembly for New Brunswick, 1844.

ORDINARY DIET TABLE.

BREAKFAST.

Sunday	Bread, tea, milk and sugar.
Monday	" " " "
Tuesday	" " " "
Wednesday	" " " "
Thursday	" " " "
Friday	" " " "
Saturday	" " " "

DINNER.

Sunday	Beef soup and potatoes.
Monday	Fish and potatoes.
Tuesday	Beef soup and potatoes.
Wednesday	Rice and molasses.
Thursday	Beef soup and potatoes.
Friday	Fish and potatoes.
Saturday	Rice and molasses.

SUPPER.

Sunday	Bread, tea, milk and sugar.
Monday	Oatmeal pudding and molasses.
Tuesday	" " "
Wednesday	" " "
Thursday	" " "
Friday	" " "
Saturday	" " "

NOTE.—Extras, as butter, eggs, wine, etc., supplied for particular patients when absolutely required and ordered by the doctor.

Supposed average number of inmates, patients and keepers for the year in prospect, say 70.

ORDINARY DIET ALLOWANCE FOR ONE INDIVIDUAL
IN THE WEEK.

Nine lbs. bread, cost, say.....	13d.
One and one-half ozs. tea.....	2d. 5-8ths
Five-eighths lb. sugar.....	2d. 5-8ths
Two and one-fourth lbs. beef.....	6d. 5-8ths
One-fourth lb. barley.....	6-8ths
Three-fourths lb. rice.....	1d. 4-8ths
One and one-half lbs. oatmeal.....	2d. 5-8ths
Two gills molasses.....	1d. 3-8ths
One lb. fish.....	1d. 2-8ths
Twelve lbs. potatoes.....	3d. 4-8ths
Extras of all kinds.....	3d. 2-8ths

3s. 3d.¹

¹ Journals of the House of Assembly for New Brunswick, 1844.

Judging from the journals of the House, as previously stated, almost our only source of information, little or no further action was taken toward the provision of a permanent asylum until 1845, when a correspondence was entered into between the governments of Nova Scotia, Prince Edward Island and New Brunswick, with a view to the erection of a combined asylum for the three provinces. Toward the furtherance of this object, the Nova Scotia and New Brunswick legislatures appointed commissions to confer on the subject. That of Prince Edward Island declined to do so, preferring the establishment of an institution for itself. The commissioners from Nova Scotia were Messrs. H. Bell, S. P. Fairbanks and Dr. Alexander Sawyers, and those of New Brunswick Messrs. William Wright, John Robertson and Dr. G. P. Peters. These gentlemen met in St. John on July 15, 1845. After a full discussion of the matter they expressed the unanimous opinion that the difficulties attending the foundation of a joint institution were so numerous that they would not be justified in recommending such a course, separate establishments for each province being much more advisable.

At once, on the announcement of this conclusion, the wrangle as to the site to be selected for a permanent asylum was recommenced and the journals of the same year (1845) contain reports from commissions in Fredericton, represented by Dr. G. M. Odell, Dr. J. B. Toldervey and Mr. B. Wolhaupter; Saint John, represented by Dr. Geo. P. Peters, W. Jack and John Ward, Jr.; Gagetown, represented by Harry Peters, Sen., and N. H. DeVeber; and Sussex Vale, represented by A. C. Evanson and E. A. Vail. Each of these reports claimed the superior eligibility of sites in the districts represented, basing their contestation on scenic beauty, superiority of climate, salubrity, facilities for sea bathing, abundant water supply, accessibility at all seasons, convenience to a good market, nearness to the most populous part of the province whence the bulk of patients were received, etc.

During the same session of the House of Assembly the report of the superintendent called attention to the utter inadequacy of the temporary asylum to meet the needs of the province, as well as to its disadvantages as an institution for the insane in these forceful words:

It must be borne in mind that we at present labor under every disadvantage. In the first place, we have up to the present moment been the receptacle of all of the old incurable cases in the province; many admitted within a few months are of 10 and 15 years' standing; such cases are of course incurable, and will remain on our list of patients till discharged as dead; and it must further be remembered that we have none of the advantages of other more favored institutions; here we are confined within the limits of a few town lots, which do not permit but partially of either amusement or occupation for the treatment of a malady which, of all others, requires these indispensable requisites for its proper treatment; it is true, we make work, as it may be called, to occupy the minds and bodies of our patients so as in some measure to direct their thoughts from their hallucinations; but no man will apply himself with energy to a task which, at first sight, he can observe is unprofitable, and no persons are more alive to every consideration of this kind than most lunatics. . . . The building at present occupied as a lunatic asylum is now full, it can hold no more, and the time has arrived when, as a matter of necessity, accommodations must be furnished for the lunatics by the province.¹

This utterance of Dr. Peters was echoed by the commissioners in the annexed report to the Hon. Provincial Secretary.

SAINT JOHN, April 7, 1845.

SIR: The commissioners of the Provincial Lunatic Asylum beg leave to call the attention of His Excellency the Lieutenant-Governor to the present overcrowded state of that building, the number of inmates amounting to 75, exclusive of keepers and necessary attendants. They have been applied to also to admit four more cases, but are unable to receive them for want of accommodation, and they very much fear that the present crowded state of the building will be attended with bad consequences so soon as the weather becomes warm.

The present building will require an outlay of about £150 to make it habitable for another winter, and if the Poverty Hall property could be purchased it would do sufficiently well for a large portion of the more quiet lunatics, and so make room in the present asylum for all the troublesome cases. The men might during the summer be occupied upon the farm and improving the grounds, instead of remaining as they are in comparative idleness.

They have much pleasure in adding that the Poverty Hall site has been approved of by the medical profession generally at Saint John. Should the purchase of this farm not be determined upon, it will be absolutely necessary for the commissioners to hire a building at perhaps a heavy rent, or else be under the necessity of sending back the unfortunate lunatics

¹ Journals of House of Assembly for New Brunswick, 1845.

to the counties from whence they came, as it is a matter of impossibility to accommodate one more patient in the present building.¹

We have the honor to be, Sir,

Your obedient servants,

GEORGE P. PETERS, M. D.,

W. JACK,

JOHN WARD, JR.,

Commissioners, Lunatic Asylum.

To this report was appended the following certificate :

The undersigned, members of the medical profession at Saint John, having duly considered all the advantages attending the location of the provincial lunatic asylum as an hospital for the treatment and cure of insanity, are decidedly of opinion that Poverty Hall offers advantages as a site for this institution greater than either Hampton or Gagetown.² (Signed.) Alex. Boyle, M. D., Robert Bayard, M. D., W. Bayard, M. D., L. B. Botsford, M. D., William Livingstone, C. M., John Paddock, S. S. F., W. S. Harding, Surgn., Thomas S. Wetmore, M. D., J. Boyd, M. D., etc., D. Miller, surgeon, and George P. Peters, M. D.

At the next session of the House, held in 1846, a committee was appointed, composed of Messrs. Charles Simonds, S. Z. Earle, Robert Thomson, James Taylor and W. H. Botsford, to which was referred the question of the erection of a provincial asylum. Their report was to the effect that the accommodation in the temporary asylum was utterly insufficient, and that means should be immediately adopted to provide an institution commensurate with the requirements of the province. In order that the House might have all the information desirable and requisite upon so important a subject, they begged leave to refer to the report of the commissioners appointed upon the address to the Assembly in the year 1836.³ The commissioners also expressed their approval of a plan for the proposed asylum furnished them by Dr. G. P. Peters, in preference to several others submitted for their inspection.

After consideration of this report and much discussion, principally upon location, it was at last decided, on the 3d of April, 1846, by a vote of 13 to 14, to advise the payment of the sum of £2500 towards the erection of a provincial asylum, this sum to be

¹ Journals of House of Assembly for New Brunswick, 1845.

² Journals of House of Assembly for New Brunswick, 1845.

³ This is the address already referred to as written by the Rev. Mr. Coster. *Vide* Appendix A.

expended under the discretion of commissioners to be appointed by the Lieutenant-Governor in Council upon a site in the vicinity of St. John, the said site to "combine the advantages of climate and varied scenery, and near enough to the active and changing scenes of life to arrest the attention and amuse the inmates."¹

That the financial affairs of the hospital were in a somewhat mixed condition is shown by the fact that at the same session petitions were submitted from Mr. George Matthew, formerly overseer of the poor and superintendent of the temporary asylum, and Dr. Peters, its visiting physician, the former asking for the sum of £500 to cover expenses incurred for the support of the institution in 1842, the latter that provision should be made to cover his services as physician in the same year. Both these claims were ultimately arranged, Dr. Peters being allowed the sum of £100 with three years' interest.²

The building commissioners selected by the Governor were G. P. Peters, M. D., William Jack, John Ward, Jr., and John R. Partelow, but nothing further was done that year, as the government failed to approve of the plans submitted by the commissioners.

Just why St. John was selected as a site in preference to Fredericton, the capital, is an unsolved mystery. It may have been that some friend of the government had the land to sell, and that the dark horse won. At all events, the choice seems to have been a wise one. As Dr. Waddell rather quaintly observes in his report as medical superintendent for the year 1874:

The result has proved the judiciousness of the selection. It was argued by those opposed to this situation, very unphilosophically, that the noise produced by the rapids³ would disturb the patients; but the sounds caused by rushing water is the music of nature, and is always in harmony with, and soothing in its effect on, the nervous organism, and is an influence perpetual in its operation, and in some measure an antidote to the grating effect of the modern railway and mill whistle by which we are now surrounded.

¹ Appendix to journals of House of Assembly of New Brunswick, 1875. Report of the medical superintendent of the Provincial Lunatic Asylum for the year 1874, p. 6.

² Journals of the House of Assembly for New Brunswick, 1846.

³ The hospital is situated on the river bank, close to the celebrated Reversible Falls.

Again, the present superintendent, Dr. Anglin, writes as regards the choice of St. John, under date 15th July, 1914:

I would select it to-day for the following reasons, some of which probably held good 75 years ago: The climate here is not severe in winter, nor ever hot in summer. St. John is the largest place in New Brunswick, and, being a port, it is more easy to obtain supplies of all kinds and to get employees. It is also more central or at least more accessible to other parts of the province. Most of the patients come from this locality, so that the cost of conveyance to the institution is less. No matter what reasons actuated the old Legislature, it is a good thing that they picked out St. John, though they might have chosen a safer site in the neighborhood. However, they probably never dreamt that the insane would be given the liberties they now have, so that the nearness of the turbulent river was not given any consideration. The fact that St. John already had a building for the insane must have had some influence in making this the permanent place.

By an act passed the ensuing year, April 14, 1847, the Legislature appropriated an additional sum of £10,000 for building (in all £12,500) and also £2000 for the purchase of land.¹ The commissioners were by the same act authorized to procure a site and enter into contracts for the erection of a building, the plans, etc., to be first submitted to the Lieutenant-Governor in Council for approval.

Designs prepared by Mr. Matthew Stead, architect, having been approved of by the government, ground was broken in September, 1846, on a plot of land about 50 acres in extent, procured from the mayor, aldermen and commonalty of the City of St. John, and situated in the parish of Lancaster, less than a mile outside the city. The site selected was a very beautiful one on the river bank, commanding to the eastward a magnificent view of the harbor and city; to the southward the Bay of Fundy, and, in clear weather, the coast of Nova Scotia; and to the northward the St. John River, with its everchanging rapids.

On June 24, 1847, the corner-stone of the building was laid with Masonic honors.² This ceremony was performed by His Excellency the Lieutenant-Governor and Commander-in-Chief of New Brunswick, Sir William M. G. Colebrooke, assisted by the Hon. A. Keith, provincial grand master of Freemasons of Nova Scotia,

¹ Statutes of New Brunswick, 10 Vict., Chap. 55.

² See Appendix C.

New Brunswick, Prince Edward Island and Newfoundland, in the presence of a large concourse of people.

After addresses by His Excellency and Mr. Keith, the Rev. Dr. Gray, rector of Trinity Church, St. John, and grand chaplain of the Masonic Order, offered up the following appropriate dedicatory prayer :

Almighty and eternal God, maker and preserver of unnumbered worlds, we humbly acknowledge our entire dependence upon Thee, for life, for health and for all things. We know, O Lord, that without Thy inspiration and aid, all human wisdom is folly, all human strength weakness. In Thy name we assemble and meet together, we entreat Thee from Thy holy habitation—from realms of light and glory—to look down upon us, and vouchsafe Thy presence and blessing, that we may know and serve Thee aright, and that all our doings may tend to Thy glory, and to the salvation of our souls. God grant that as this work is begun, so may it be continued and ended in Thee. Grant that the Sacred Art which from the beginning has been especially employed in rearing temples to Thy holy name, may now be blessed in this erection for the good of man and the benefit of human society. Let Thy providential protection, we beseech Thee, be over those who shall be more immediately engaged in carrying on this work and shield them from danger and accident during its progress. In faith and hope, O Heavenly Father, we commend ourselves and our undertaking to Thy favor and protection. "Prosper thou the work of our hands, O prosper thou our handiwork." Hear, we beseech Thee, our humble petitions, for the sake of that Eternal Word, which was from the beginning, and shall be when time has ceased to roll—even Jesus Christ our Lord and Saviour. Amen.¹

Dr. Alley, rector of St. Andrews, grand orator, then delivered an eloquent and interesting address, which ended the proceedings of the day.

By the autumn of 1848 a portion of the building, consisting of the center structure and a part of one wing, was so far advanced that December 12 of that year witnessed the abandonment of the temporary asylum, the pioneer Canadian institution for the insane, by the opening and transfer to the new edifice of the 90 patients then resident in the old establishment.

The operation of the institution, the erection of which had been begun two years previously, and the legal title of which was the Provincial Lunatic Asylum, was placed in the hands of Dr.

¹ Appendix to journals of House of Assembly of New Brunswick, 1875. Report of the medical superintendent of the Provincial Lunatic Asylum for the year 1874, p. 6.

Peters, medical superintendent, Mr. Hugh McKay, clerk, and Mrs. Donnelly, matron.

On March 27, 1849, an act was passed by the Legislature to make provision for the management of the establishment, and for vesting the property in the Queen's Majesty, her heirs and successors.¹ By the terms of this act there was to be a board, consisting of not less than five, nor more than nine commissioners, appointed by the Governor in Council, to conduct the affairs of the asylum, said commissioners to receive no compensation. This board, of which three were constituted a quorum, was given power to make by-laws, etc., which, however, were to be submitted to both branches of the Legislature. Provision was also made for a monthly visitation of the asylum by one or more of the commissioners; half-yearly visitations by the majority of them; and a yearly visitation by the entire board, which had to report to the Governor in Council. Another provision of the act exempted the medical officer, keepers and under-keepers, and servants of the asylum from service in the militia and on juries.

His Excellency was pleased, accordingly, to name as the commissioners Hon. L. A. Wilmot, Hon. Wm. McLeod, John Ward, Esq., John Simpson, Esq., F. A. Wiggins, Esq., William Olive, Esq., Robert F. Hazen, Esq., Peter Bernard, Esq., and John Duncan, Esq. John Ward, Esq., was appointed chairman, with Mr. John C. Ward as secretary.

Toward the close of the first year of the asylum's existence Dr. Peters, who had done yeoman's service in the cause of the insane, retired from the office of medical superintendent. The position was then tendered to Dr. Le Baron Botsford, who declined it, and on December 1, 1849, Dr. John Waddell was appointed to fill the vacancy, entering on the discharge of his duties on the 6th of that month.

In 1851 Wm. Jack, Esq., who had given so much time and care toward the up-keep and management of the temporary asylum, as well as acting as one of the commissioners for the erection of the permanent one, and aiding materially in its organization and development, retired from active participation in hospital affairs; while the succeeding year saw the death of Mr. J. C. Ward,

¹ Statutes of New Brunswick, 12 Vict., Chap. 28.

secretary to the board, and a very efficient officer. His place was filled by the appointment of Mr. Charles Ward.

By 1853 the part of the building originally constructed had become filled to overflowing, and a wing was erected on the south side under the inspection of Mr. Stead. This gave a temporary relief.

For a number of years there had at different times been complaints with regard to the management of the various provincial institutions under the old Tory (family compact) party, and in 1857, after the advent of the reformers to power, the House of Assembly passed a resolution to the effect that it was, in the opinion of the House, the duty of the government to cause immediate inquiry to be made into the management of the provincial penitentiary, lunatic asylum, lazaretto at Tracadie, and all other institutions receiving provincial aid, including the lighthouses and marine hospitals, with a view, if possible, to reducing the expenses of maintaining the same. The Hon. David Wark and Messrs. Henry Fisher, Joel Reading, James McFarlane and George E. Fenety were accordingly appointed commissioners by Governor Manners-Sutton to inquire into the management of the asylum and other public institutions. Their report, which was an elaborate one, was laid before the Legislature in 1858. As a result, in 1859, the control of the asylum was by Order in Council vested in the department of the Provincial Board of Works. This was subsequently confirmed by act of Legislature.

In 1861 yet another change was effected by the transfer of the control of the internal affairs of the institution from the old board of commissioners and their secretary to a new commission consisting of the heads of governmental departments. The first commission under the new departure was composed of the following members: Hon. S. L. Tilley, Provincial Secretary; Hon. Charles Walters, Solicitor-General; Hon. James Steadman, Postmaster-General; Hon. G. L. Hatheway, chairman Board of Works; Hon. John McMillan, Surveyor-General; R. W. Crookshank, Esq., secretary and treasurer.

The system then adopted practically still remains in vogue. With few exceptions, the commissioners have since been heads of departments, retiring with any change of government.

The year which saw the adoption of this latest system of management witnessed also the erection of the wing on the north side of the original structure.

During 1868, 1869 and 1870 Hon. W. P. Flewelling was one of the commissioners and took a special interest in the advancement of the establishment. In 1869 he visited, in company with the medical superintendent, a number of kindred institutions in the United States with a view to contemplated improvements at home. These he succeeded in accomplishing, the chief of them being the extension, in 1870, of the center building to the rear so as to give increased capacity for the laundry department and provide a more suitable place for boilers in connection with the heating and cooking arrangements.

The asylum as thus completed consisted of a central portion, three stories high, surmounted by a cupola, and four three-story wings, making an east front of 300 feet, and a north and south front each of 150 feet. An extension backward from the main building contained the laundry and boiler rooms in the basement, the kitchen and store rooms on the first floor, and the chapel on the second. This formed with the wings two quadrangular courtyards, connected with which were airing inclosures for the patients. The material used in construction was brick, with stone trimmings and slate roof. The capacity of the institution was 200—100 of each sex—and the total cost thereof, including outbuildings and land, was about \$120,000.

Prior to 1872 the medical superintendent was allowed no discretion whatever as to the character of patients admitted. Provided the required legal conditions were complied with, he was powerless to refuse any case. All classes—idiots, imbeciles, paralytics and senile demented—were sent to him, and this without any previous application having to be made. The overcrowding of the institution led to the betterment of this state of affairs by the publication in the *Royal Gazette*, on June 26 of that year, of the following regulation made by the commissioners:

It is ordered, in consequence of the crowded state of the Lunatic Asylum, that, until further notice, the medical superintendent be authorized to exercise his judgment in reference to receiving additional patients. All magistrates and others are therefore notified that, except in the case of lunatics clearly dangerous and violent, it would be advisable before issuing or procuring warrants of apprehension and commitment to communicate with Dr. Waddell.

On the 31st of October, 1875, after over 26 years of faithful service, Dr. Waddell tendered his resignation as medical superintendent. He was, however, induced to extend his term of office up to May 1, 1876, that he might induct his successor, Dr. James T. Steeves, into the duties of the position.

On his installation Dr. Steeves found the asylum much overcrowded. Some additional accommodation had been gained by the conversion of the basements and space over the laundry into dormitories, but at the close of his first year in office the building, originally calculated to receive 200, had no less than 276 inmates. To meet the emergency he suggested that the north and south wings of the building should be extended 100 feet so as to provide room for 80 more patients.¹

A modification of this suggestion was carried into effect, on the male side in 1879-80, and on the female side in 1881-82. The relief, however, was but ephemeral. Very soon the building was again crowded, and the problem of providing for those seeking admission became as pressing as before. Under these circumstances the government, fully recognizing that all lunatics are properly the wards of the state, determined upon the purchase of additional land and the erection thereon of separate buildings for the chronic insane. In accordance with this plan in 1885 a farm of 250 acres was purchased about a mile from the asylum proper. On this was erected a group of three two-story brick pavilions for the accommodation of 150 patients, with a residence for a steward, who was given the general management of affairs there, under supervision of the medical superintendent. The central building and west wing of the group, which was designated the "Annex," were constructed in 1885, the east wing in 1889.

The system thus inaugurated contemplated the erection of additional pavilions as they might be from time to time required, and the transfer to them of quiet, chronic patients from the main, or reception asylum as that building became filled. Here, with extensive agricultural facilities, their employment, it was deemed, might be made useful both to themselves and the state, an opinion that has been practically verified.

¹ Report of the medical superintendent of the Provincial Lunatic Asylum for the year 1876, p. 23.

According to Dr. Steeves' report for the year 1890, the population of the province was 340,000, and the number of insane about 800, including idiots and all others incapacitated through mental defect. The capacity of the hospital was 320, while the "Annex" could house 150. The asylum population on January 1, 1891, was 455.

In 1892 an addition was made to the hospital outfit in the shape of a much-needed detached structure for a mortuary, in general plan the same as the mortuary at the Government Insane Hospital, Washington, D. C. The building comprised "a basement for the storage of morbid specimens; a first floor for a little chapel, a repository for the bodies, and a post-mortem room; and a half-story, well lighted, for microscopic and photographic work."¹

During 1893 an act was passed constituting the following ex-officio visitors to the asylum: His Honor the Lieutenant-Governor, the Hon. the Chief Justice, the Hon. the Attorney-General, the Hon. the Provincial Secretary, and the Speaker of the House of Assembly. The same act provided for a visiting committee to be composed of one representative of each of the Christian denominations in the province, to be nominated by the Lieutenant-Governor in Council, together with not more than five other persons who might from time to time be named by the same authority, and who should continue as visitors during pleasure. Under this act the members appointed to the visiting committee were: His Honor Judge James G. Stevens, Joseph F. Allison, Esq., Edward F. Smith, Esq., Hon. A. F. Randolph, Edward Sinclair, Esq., Mrs R. Chipman Skinner, Hon. Archibald Harrison, Mrs. P. A. Landry, Rev. G. A. Hartley, Dr. Boyle Travers, Stephen B. Appleby, Esq., Dr. J. S. Benson and Mrs. W. N. Todd.

In September, 1895, Dr. Steeves was prostrated by a serious attack of illness. This so shattered his health that he was obliged to retire from the superintendency, which he did on May 1, 1896, being succeeded by Dr. George A. Hetherington, who entered upon the duties of the office August 17 of that year.

Under Dr. Hetherington's management the asylum proper was

¹ Report of the medical superintendent of the Provincial Lunatic Asylum for the year 1892, p. 10.

enlarged by the raising of a part of the roof so as to furnish an additional story, an electric-lighting plant was installed, and hospital wards, with operating room, were provided for both male and female patients.

Dr. Hetherington, in his report for the year 1896, also advocated the inauguration of a training school for nurses, an idea previously mooted by Dr. Steeves, who, in his report for 1894, says: "It will be in order to establish a school for training nurses in this hospital when the staff of officers has been made commensurate with the number of patients under care, and the work for successful issue thus rendered possible." For the reason set forth by Dr. Steeves, the medical staff still being limited to the superintendent and one assistant, the formation of a nurses' training school is still a vision of the future.

In addition to a training school, Dr. Hetherington strongly recommended the provision of a separate building for tuberculous patients, and the installation of a hydrotherapeutic plant, neither of which advances, however, has yet been made.

Dr. Hetherington having severed his connection with the institution early in May, 1903, the reins of office were assumed on October 1, 1904, by Dr. James V. Anglin, an honor graduate in arts and a medallist in medicine of Queens University, Kingston, Ont., and presently assistant superintendent of the Protestant Hospital for Insane, Montreal, Que.

During the ten years that Dr. Anglin has had charge many important changes and improvements have been effected, so much so that one who knew the institution prior to his time would scarcely recognize it as the same. The grounds have been made more ornate and attractive; the furnishing and decoration of the wards have been greatly improved; the antiquated airing courts have been done away with; the high, unsightly board fence which encircled the hospital property has been removed; a vast improvement has been made in the water supply, and a fan ventilating system introduced, doing away with the noisome odors characteristic of the building in by-gone years. In addition, the means for the occupation and diversion of patients have been amplified, and reading matter much more liberally supplied them. He, furthermore, has asked for the establishment of a congregate dining room and the provision of an assembly hall, but as yet

these boons have not been forthcoming.¹ As regards the cost of the changes and improvements introduced into the hospital he says, in one of his reports:

None of the outlay has been asked for as a mere matter of sentiment, or for the sake of making the lives of our patients luxurious. Our sole thought was, and is, that the best interests of the general public would be served, the best aims of the hospital attained by doing everything in our power to secure the recovery of the curable and add to the happiness and comfort of the unfortunate ones who must spend their lives here. I grant that many a patient is better off here, is better housed and fed and clad than ever he was at home; but is there a man who has health and freedom who would have it otherwise?

Probably the most important and beneficent of the changes brought about in the asylum system of the province since Dr. Anglin took charge of its hospital was made the year subsequent to his arrival, that is, in 1905, in the shape of a revision of the lunacy laws. At the session of the Legislature prior to his advent on the scene a good deal of dissatisfaction had been expressed about the management of the hospital, and an investigation threatened. To avert this the Government changed the name of the institution from "Asylum" to "Hospital," and Drs. Addy and Emery were appointed to join with the future superintendent in taking cognizance of the whole state of asylum affairs.

The superintendent was given a free hand by the commissioners to make such alterations as he thought best in the form of commitment. The chief change accomplished by the new regulations was the removal of the power of sending patients to the hospital from the hands of justices of the peace, and placing it in those of qualified physicians. Under the old method many were sent to the asylum on the order of a justice of the peace with often not more than 20 words relating to the case, written by a physician on a scrap of note paper. The usual wording of these apologies for certificates was simply that the patient was dangerous to be at large, as witness the following true copy of one of them:

KINGS Co., N. B., Aug. 17, 1895.

This is to certify that.....is of unsound mind, and I believe dangerous to be at large.

(Signed).....M. D.

¹ Report of the medical superintendent of the Provincial Hospital at St. John, New Brunswick, for the year 1906.

Whatever history of the case was obtained had usually to be procured from the officer who accompanied the patient. Now as full a history as possible is required, while all papers requisite for admission must be forwarded to the medical superintendent, and his permit secured before any case can be brought to the hospital. Formerly, the hospital authorities knew nothing whatever about the patient until his arrival, and had no option but to admit all comers. Under these circumstances there is no doubt the institution was often imposed upon, persons being sent in who should have been cared for elsewhere. In order that no case needing immediate confinement might suffer by the delay in issuing a written permit, the superintendent was empowered to allow such a patient to be brought without the usual formalities if representations were made showing the urgency of the case by telephone or otherwise. The necessary certificates were to follow within ten days.

By the changes made no document whatever is now required from a justice of the peace, the medical certificate, to which is annexed a form of history, being the all-important paper necessary for admission. In addition to the statement made by a physician, two other certificates are requisite, one from a relative, and one from the secretary of the municipality where the patient belongs. By these his legal settlement and financial circumstances are ascertained, so that, if in a position to pay anything towards maintenance, his friends will be called upon to do so. When patients are able and willing to pay the entire cost of their support and a bond is signed to that effect, they may be admitted on medical certificates only, but in such cases there must be an examination made by two physicians.

To suit the changes in the commitment laws, modern certificates were prepared, copied after the best in use elsewhere and modified to suit local conditions.

In 1909, as appears in the medical superintendent's report for that year, fire consumed what is described as "in one sense the most important part of the hospital buildings; the laundry, sewing room, employees' quarters, a ward occupied by working patients, the boiler house, etc., were destroyed, while the chapel, center building, kitchen and heat and light plant were seriously damaged."

Fortunately the conflagration was unattended with loss of life, and, while causing great temporary inconvenience, has not proved an unmixed evil as, in consequence, the repairs, etc., necessitated have resulted in notable advances, among others the erection in 1913 of a new fireproof laundry building.

A custom peculiar to this institution, and as such worthy of mention, is the collection of an admission fee of \$20, either from relatives or municipalities, for every patient received into the hospital. Dr. Anglin states it has been collected as far back as he can trace, and that he thinks it was the earliest attempt to get the municipalities to share with the province in the maintenance of their insane. The custom, he says, has become so well established that everyone expects to pay this fee, and there is never any objection made to it. Beyond this no payment was made by the municipal authorities, the whole outlay being met by the government. To remedy this, in 1894 legislation was enacted to charge the counties \$1.25 each per week for all harmless patients. This met with violent opposition. The list of harmless cases made out by the then medical superintendent was an extremely long one, and many included therein were not admitted to be harmless by those outside. In consequence the act became almost a dead letter. Such state of affairs and the desire to increase the revenue led to the passage of a new act in 1913, to become operative at the beginning of 1914. This demands of the counties \$1 per week for all their insane, whether harmless or not, if relatives do not pay that amount or more.

As now constituted, the institution, including the annex, has a capacity of 630, with, on October 31, 1913, a population of 600, viz.: 332 men and 268 women.

New Brunswick, ever since the inauguration of its asylum system, has steadfastly declared against the incarceration of lunatics, even temporarily, in prisons. Recognizing in the fullest degree the doctrine of state care, it has always endeavored to provide for all classes of its insane, and can now boast that it has accommodation for all this hapless part of its population.

APPENDIX A.

APPENDIX TO JOURNAL OF HOUSE OF ASSEMBLY OF
NEW BRUNSWICK, 1836-37.

*To His Excellency Major General Sir Archibald Campbell, Bart., G. C. B.,
Lieutenant-Governor and Commander-in-Chief of the Province of
New Brunswick, etc.*

Your Excellency having been pleased, in compliance with the prayer of an address of the House of Assembly, presented to Your Excellency during the last session of the Legislature, to appoint us commissioners "to ascertain the most eligible site near the City of Saint John for a provincial lunatic asylum, together with a plan of the same, and an estimate of the probable cost of land, and the erection of such buildings, etc., as may be required for the same; and also any information we might be able to obtain relative to the management of similar institutions:" We beg leave to certify to Your Excellency that we have given to the subject our best attention, and humbly submit to Your Excellency's consideration the following

REPORT.

Our first care, in the execution of the duties committed to us, was to open a correspondence with some gentlemen resident in Great Britain and the United States of America with a view to procuring some information relative to the management of lunatic asylums. In addition to the applications which we forwarded to these gentlemen, we took the liberty of addressing a letter to William Crane and L. Allan Wilmot, Esquires, who were about to proceed to London as delegates from the House of Assembly to His Majesty's government, soliciting their assistance in procuring the desired information. As our letter to those gentlemen formed the basis of those which we forwarded to Great Britain and the United States, we shall insert a copy of it in the Appendix.

These different applications, we are happy to say, have procured for us a great deal of highly valuable information, and some plans from which we have compiled a sketch for a plan, which, in our judgment, will be well suited to the exigencies of the province. The following is a list of the works which have been sent us, and for which our best thanks are due to the gentlemen from whom they have been received:

"Annual Reports of the Directors of the Glasgow Royal Asylum for Lunatics:" from the first (1814) to the twenty-second (1836), except the twenty-first.

Stack's "Remarks on the Construction of Public Hospitals for the Cure of Mental Derangement, with Plans." 1807.

"Regulations of the Glasgow Asylum for Lunatics." 1823.

"Charter of the Glasgow Royal Asylum for Lunatics." 1833.

"Report of the General Committee of the Glasgow Asylum for Lunatics." 1814.

"Report to the Board of Trustees of the Massachusetts General Hospital." 1835.

"Report of Commissioners to Superintend the Erection of a Lunatic Hospital at Worcester," with a plan. 1832.

"Second and Third Reports of the Trustees of the State Lunatic Hospital at Worcester." 1834, 1835.

"Ninth Report of the Board of Managers of the Prison Discipline Society, Boston." 1834.

To the above list must be added two very able manuscript reports, the one from Dr. Galbraith, superintendent of the Glasgow Asylum, addressed to William Henry Dobie, Esquire, Glasgow; the other from Dr. Lee, superintendent of the McLean Asylum, Charlestown, addressed to the Rev. Lewis Dwight, secretary of the Prison Discipline Society. To those gentlemen, we think, our best thanks are due for the great pains they have taken to furnish us with information. These reports will also be inserted in the Appendix.

In our letter to William Crane and L. Allan Wilmot, Esquires, we expressed an opinion that "the number of insane persons in the province might amount to about fifty." (See Appendix.) We now believe that we have here greatly understated the number. We think it probable that there will be found nearly three times that number, a conclusion to which we have been led from having ascertained the number of such persons in other countries.

The ninth report (p. 86-310) of the Prison Discipline Society gives a list of "lunatics in the United States," being nearly as 1 to 1000 of the population, *i. e.*, in

Maine	399
New Hampshire	269
Vermont	280
Massachusetts	610
Rhode Island	97
Connecticut	297
New York	1,918
New Jersey	320
Pennsylvania	1,348
Delaware	76
Maryland	447
Virginia	1,211
North Carolina	737
South Carolina	516
Kentucky	687
Tennessee	681
Ohio	935
Louisiana	215
Indiana	139
Illinois	157

Alabama	309
Missouri	140
Michigan	31
Arkansas	30
Florida	35
District of Columbia	39

Total11,923

This list contains no return from Georgia, the population of which was, in 1832, 516,823; nor Mississippi, with 136,621.

The population of the United States, as appears from the letter of the Secretary of State to the Speaker of the House of Representatives, dated January 4, 1832, was not exactly ascertained at the fifth census. The returns for the territories of Florida, Arkansas and Michigan, and the District of Columbia were wanting. Mr. W. Gore Ouseley, in his "Remarks on the Statistics and Political Institutions of the United States," says (p. 197) that "the whole population of the United States probably amounts at present (1832) to as nearly as possible 13,000,000."

With respect to Scotland, we find from Brewster's "Edinburgh Encyclopedia" (edition 1819), under the article "Insanity," that, "according to the returns then lately furnished in obedience to the act of Parliament, from all the parishes in Scotland, in number 992, with the exception of 259, the number of insane persons was 3489." In 1821 the population of Scotland (Cleland's History of Glasgow) was 2,093,456. This, without noticing the increase in the population in the three years between 1818 and 1821, or the 259 parishes sending no returns, would give the proportion of insane persons as 1 in 600.

We shall not, we think, be overstating the number in this province if we assume the smaller of these proportions. We must consider that our early population came originally from the States, and that we are subject to the same influx of emigrants as they are, bringing with them their own diseases and tendencies to disease. In 1834 the population of the province was 119,457; the increase in the previous 10 years was 45,281; supposing the increase since 1834 to be in the same ratio, it will be 11,320; making the present population to be 130,777. This would give at the rate of 1 in 1000, not 50 insane persons as we at first supposed, but 130.

And it may be stated as a fact, strongly confirmatory of the correctness of the above calculation, that in the eight months which have elapsed since a temporary asylum was opened in St. John, under the charge of Dr. Peters (see Appendix), 22 patients have been admitted into it, all of them from the County of St. John, the population of which is less than 22,000.

SITE.

In the selection of a site proper for such an institution many very important circumstances must be taken into consideration. The situation must be a healthy one; it must not be too retired, nor yet too public; it

must consist of a suitable quantity of land fit both for garden and field tillage; it must have a quantity of wood upon it fit for fuel; and it must possess within itself the means of affording occupation to the patients, both male and female.

Dr. Lee's remarks in his able report (see Appendix) are very good and seem to be fully borne out by the opinions of every author whose works we have had the means of consulting. "In the location of an insane hospital, as a first consideration I should have in view the accomplishment of these objects. It should not be too near a large city, nor within half a mile of any street which is, or will likely become, a populous part of the town. The farm should be so situated that an observer at the hospital can see every part of it, that any difficulties among those at work or engaged in sports may be seen and prompt assistance afforded. The location should be so elevated as to command a full view of the surrounding country; it should be in a region where the scenery is varied and delightful; a navigable river bearing on its basin the varieties of water craft; public roads thronged with the evidences of life and business, but not so near as to be exciting; populated and cultivated country should all be in view. These objects will afford diversion and interest, excite conversation and supply constant proofs that they are in a world of hope, and among beings who are engaged in the every-day business of life."

Fully impressed with the force of these remarks, we have given a great deal of consideration to the choice of a site, and have carefully examined several tracts of land on both sides of the River Saint John. Near Poverty Hall and at South Bay a suitable site can be procured on reasonable terms, and either of them we would respectfully recommend to Your Excellency.

PLAN.

We are also indebted to Dr. Lee's suggestions for a sketch for a plan, which we have the honor to submit to Your Excellency's consideration, which seems to us to be divested of most of the inconveniences complained of in other establishments of the same kind, and to possess advantages peculiarly its own. Dr. Lee informs us that it is a modification of the plan of the lunatic hospital at Worcester, an elevation and description of which will be found in the "Report of the Commissioners."

Your Excellency will perceive on reference to the plan that it consists of a center building 116 feet in length, 50 feet in width, and two stories high above the basement. The basement is designed to contain in front the kitchen, laundry, dairy room, cellars, surgery, etc., and in the rear, kitchens, cellars, and servants' rooms for the superintendent, matron and principal officers. Over these in rear of the ground floor will be the apartments for those officers.

In front of the ground floor will be rooms designed for a reading room for the convalescent patients, and adjoining it a committee room (these two rooms may be thrown together and used as a chapel), a billiard room, visitors' room, office and library.

The upper story may be laid out in two dormitories, each with a day room, one for male, the other for female patients of the lower class, who may be "convalescent, quiet and cleanly." (See Dr. Galbraith's report in Appendix.)

On each side of this center building it is proposed to attach a ward building, 87 feet in length, 46 feet in width, and the same height as the center. These ward buildings are to fall back 30 feet, to secure a thorough and perfect ventilation both of themselves and the center. This mode of construction is considered decidedly preferable to the plan adopted at Glasgow (see Stark's remarks), "because," as Dr. Lee observes, "if the different buildings are situated diagonally or at right angles with each other sound will be communicated from one building to another, patients see each other, from opposite windows overlook each other's yards or courts, and make signals from one to another." (See Dr. Lee's report in Appendix.) By the arrangement in the plan here submitted to Your Excellency, most of these evils are avoided. At the same time, "in consequence of the wings falling back half their width, as before mentioned, in the rear of the center building, the halls communicate at both ends with the external air, and thus the means of a most thorough ventilation are secured. Whoever has visited any public establishment where the entire end of a wing is met and closed in by the side of the main building, cannot fail to have perceived the noisomeness of the atmosphere at that place compared with it at the outer end, where free admission has been given to the pure air." (See report of Commissioners of Lunatic Hospital at Worcester, p. 5.)

Dr. Lee recommends the erection of three such ward buildings on each side of the center one as we have laid down, each falling back behind the other; and the limiting of the number of patients on each floor of each ward to 10 (see Appendix), making 20 in each ward. Three wards on each side would thus afford separate sleeping apartments for 120 patients, 60 of each sex. It is designed that each floor should have an attendants' room, a room for sick patients, a bathing room, water closet and laundry closet, in addition to the 10 sleeping rooms for the patients, and a day room and dining room for their use. All these rooms will open on a spacious hall or gallery 10 feet wide, well ventilated and lighted, and warmed either by stoves or hot air furnaces. All the dining rooms will be supplied with a dumb waiter, by means of which food will be raised from the porter's lodge in the basement.

The basements of the ward buildings are designed to contain each a spacious wood cellar and furnace room, receiving room for new patients, workshops for tailors, shoemakers and other artisans using sharp tools, to which it would be dangerous to allow unrestricted access to the patients in general, spinning room for females, etc. In the attics, sleeping apartments can be provided for the domestics and other inferior officers of the establishment.

At the back of each building it is proposed to lay out a court, in which the patients can take exercise, with a covered way on each side to protect them from sun and rain, that they may take exercise in all states of the

weather. In one of them should be a bowling green for the men. At the rear of all these courts, except one on each side, will be a shed for a workshop; at the rear of the excepted one will be a lodge for eight frantics of each sex, with apartments for attendants, etc.

If this plan be adopted, to the extent recommended by Dr. Lee, accommodation will be provided for the following patients of each sex: Ten on each floor of Ward No. 1, for patients of the highest class, paying the highest rate of board; ten on each floor of No. 2, for patients of a class somewhat inferior to these, paying the second rate of board; ten on each floor of No. 3, for patients of lower rank, paying the third rate of board—in all 120; forty paupers in the dormitories, paying the lowest rate of board. These with 16 frantics in the lodges will give a total of 176. Should it be determined to make the asylum a place of confinement for criminal lunatics, the lodges must be made two stories high to admit them.

This plan has been submitted to the inspection of Mr. Warren, an experienced architect, who has carefully examined all its details, and favored us with some valuable suggestions with respect to the mode of executing it. He recommends that the buildings should be constructed of rough stone, if that material can be found in sufficient quantity at hand; or if not, of brick; and that the walls should be built hollow, as at the hospital at Worcester. "To prevent unhealthy moisture," say the commissioners, "from being deposited upon the inside walls of the edifice, an interstice or open space is left between the external and internal courses of bricks, the courses being strongly fastened together by tiles, so that a free circulation of air through all the exterior walls, from the underpinning to the attic, will effectually obviate that almost universal inconvenience of brick habitations." (See report of Commissioners, p. 7.) Mr. Warren recommends this mode of building, both because it is invariably found to be an effectual preservative against damp, and because the great expense of furring and lathing is rendered unnecessary. He also recommends that all the floors should be double, and that a thick coat of plaster should be laid down between the two floors.

ESTIMATE.

Without having gone very minutely into a specification, Mr. Warren estimates the center building, three ward buildings on each side, four work shops, and two one-story lodges, at less than £8000.

The probable cost of furniture will be £2000, the land will cost from £700 to £1500, according to the quantity which may be purchased.

It may, perhaps, be thought that the proposed plan is on a larger scale than the exigencies of the province require, both as it respects the quantity of land, and the size of the buildings. But we have observed that in every one of the institutions of which we have accounts the insufficient quantity of land and the inadequate size of the buildings are deeply regretted and are constantly occasioning very great expense. At Glasgow (see accounts in Appendix) the expense of additions to the grounds and

buildings has amounted to almost the original cost of them. At Worcester, before the end of two years, additional land and buildings were found necessary, and it was with very great difficulty and expense that the new buildings could be so contrived as to be attached to the original plan. And Dr. Halliday, writing on the "Insane Hospitals of Great Britain," says: "The great objection to the generality of the public asylums in England is their want of space and of a sufficient quantity of ground on which the patients can be employed in agricultural labor."

But the greatest injury which is found to arise from want of sufficient space in the buildings proceeds from the utter impossibility of effecting such a classification of the patients as the proper treatment of the disease requires. At Glasgow they formed their plan on the presumption that it would be sufficient to divide the patients into male and female, and then into boarders and paupers; but it was instantly found upon trial that a more extensive subdivision was necessary. Of each of these classes some were frantic, others noisy and troublesome to the quiet patients, some were industrious, while others were idle and mischievous; some required restraint, others might be safely trusted to go at large; some required constant attendance, others could be allowed to mix with the family of the superintendent, and were even made useful in the family. It was also found that among the boarders those of the higher classes would not associate with those who were inferior to themselves. "Patients who have been liberally educated and have been accustomed to the elegancies of polished life and manners often retain a fastidious taste and a proud sense of their superiority. They feel indignant unless their accommodations be of a superior kind and are apt to be offended when exposed to the company and conversation of any person whom they may deem to be an unworthy associate." (See seventh Glasgow report, p. 15.) On points of etiquette, the insane are found to be very tenacious, and as it is laid down as a fundamental principle in the mode of successfully treating the disease that "to all sorts of persons should be afforded accommodations and attendance suitable to their rank in society, and such as they may have been accustomed to, and may again enjoy should it please God to restore them to their reason" (see Appendix), it has been deemed essentially necessary so to construct the buildings as to admit of this diversity of accommodations for the different classes of patients. Even at Worcester, an institution founded for the reception of the convicted and pauper lunatics of the State of Massachusetts, it was found impossible to manage the patients without subjecting them to a classification as minute as that for which we have endeavored to provide in the plan which we have prepared.

EXPENDITURE.

The reports which we have received contain accounts of the annual expenditure of the three asylums at Glasgow, Worcester and Charlestown. But we beg to call Your Excellency's particular attention to a most important fact, which is, that under proper management an asylum for lunatics may be made to support itself. We shall annex to this report (see Appendix)

a table showing the expenditure and receipts of the Glasgow Asylum from its commencement, by which it will appear that the board of the patients yielded a very considerable profit, even at the moderate rates of, for

	Per week.		
Paupers	8s.	6d.	
Paupers of out-parishes	10s.		
1st-class boarders	15s.		
2d-class boarders	21s.		
3d-class boarders	31s.	6d.	
4th-class boarders	42s.		
(With private servant.)			
<hr/>			
	£	s.	d.
The buildings cost at different times during 22 years.....	31,094	9	11½
The subscriptions to meet the same.....	28,838	5	10½
<hr/>			
	2,256	4	1
Expenses of the establishment.....	44,084	6	3½
Salaries of officers.....	8,879	16	6½
Wages of servants.....	5,977	19	1
Cost of furniture.....	5,454	17	6
Loans and investments.....	5,133	15	9
Charges	4,075	3	10
<hr/>			
	£	s.	d.
Receipts for board of patients.....	72,988	5	4
Interest on investments.....	207	19	8
Loans	3,580	0	0
Balance in favor of institution.....		914	1 11
<hr/>			
	76,776	5 0	76,776 5 0

From the foregoing statement it appears that the receipts for the board of patients exceeded the expenses of the establishment, the salaries and wages, the cost of furniture, and the amount of the charges; contributed upwards of two thousand pounds towards the buildings; furnished means for investing £1500, and left a considerable balance in hand. And in every institution of which we can get any account there appears to be a similar result.

But it should be observed that in neither of these institutions, more particularly that at Glasgow, is it possible to make the labor of the patients profitable from want of space. "The labors of the patients," says the eighth report, "are, as formerly, the means both of some gain and of considerable saving. A great deal of useful labor has been performed in the airing grounds by the males." "But now," says the thirteenth report, "that the laborious operations of levelling the garden and of digging away the great mass of earth which had to be removed on account of the additional wards are no longer required, our male patients of the lower classes

are at a loss for appropriate occupation." And yet under such circumstances, the institution has more than maintained itself.

Want of space, therefore, in the buildings and grounds, is an evil against which, in the proposed institution in this province, we ought to take most especial care to guard, not more for the public benefit than for the advantage of the patients themselves. Dr. Lee says "that constant occupation and labor contribute more than anything else to their recovery." Dr. Abercrombie, an eminent physician at Edinburgh, author of "Inquiry into the Intellectual Powers, and the Investigation of Truth," says, with respect to bodily occupation, "where this can be accomplished in such a manner as fully to occupy the attention and produce fatigue, there is reason to believe that much benefit may result from it." Dr. Gregory, also an eminent physician, and author of the "Conspectus Medicinæ Theoreticæ," mentions "a farmer in the north of Scotland who had acquired uncommon celebrity in the treatment of the insane, and his method consisted chiefly in having them constantly employed in the most severe bodily labor."

We shall now produce some instances of the successful introduction of manual labor into asylums in different places. Dr. Pinel, for many years superintendent of the celebrated asylum in the Bicêtre at Paris, and author of some valuable works on the treatment of the insane, says that "at the principal hospitals in Spain, those of the insane capable of working are distributed every morning into separate parties; an overlooker is deputed to each class, who apportions to them individually their respective employments, directs their exertions and watches over their conduct. The whole day is thus occupied in salutary and refreshing exercises, which are interrupted only by short intervals of rest and relaxation. The fatigues of the day prepare the laborers for sleep and repose during the night. Hence, it happens that those whose condition does not place them above the necessity of submission to toil and labor are almost always cured; whilst the grandee, who would think himself degraded by exercise of this description, is generally incurable."

Dr. Halliday (Sir Andrew Halliday, one of the Royal physicians at Hampton Court, who has the merit of having been the first to call the public attention to the disgraceful state of the lunatic asylum in Great Britain, in an anonymous pamphlet addressed to the Marquis of Lansdown, then Lord Henry Petty, Chancellor of the Exchequer), says: "At Wakefield the patients have uniformly been kept employed at their various trades and in agricultural labor, and the best results have followed this judicious system." Dr. Ellis, then superintendent of the Wakefield Asylum, now director of the Middlesex County Asylum at Hanwell, says they have there "not only farming and gardening, but all trades have been forced into the service; we have spinners, weavers, tailors, shoemakers, brewers, bakers, blacksmiths, joiners, painters, bricklayers and stonemasons, all employed. Besides the great and evident benefit which this system has had in the recovery of the patients themselves (for many never begin to amend until we have induced them to engage in such employments), it is a source of great saving to the institution; for, notwithstanding that we have for many

years received only seven shillings a week for a pauper, a fund has accumulated which by the end of the year will exceed £3000."

The third report of the Worcester Hospital says: "We find the working men always inclined to labor. Shut up in our halls, or in their cells, they are unhappy, restless, discontented, and in consequence less mild and docile, often troublesome. But when suffered to go out into the field and garden to labor, their whole nature seems changed at once. They become cheerful and healthy. Appetite and sleep are promoted, and the chances of recovery greatly increased." The male patients in 1835, with only one farmer to direct them, raised produce to the estimated value of \$849.50, and, besides much other labor about the grounds, new buildings, walks, etc., cut, sawed, and piled from 200 to 300 cords of wood, with the help of the farmer." p. 27.

The labor of the female patients is equally productive and valuable. At Glasgow (eighth report) "a great supply of bed and table linen has been made from yarn spun by the females. Some of the patients have become expert assistants to keepers, and faithful in performing what they undertake." At Richmond (Ireland) "during the year not less than 3188 skeins of yarn, 406 pairs of men's and 319 pairs of women's stockings were knit; and of linen worn in the establishment, there were made by the female patients for the use of the inmates 140 sheets, 180 chemises, 115 pillow cases, 56 pairs of sheets, 53 rollers, 83 bodices, 80 night caps, besides the whole clothing of the male and female attendants." Accounts quite as favorable as these are given of the asylums at Lancaster, Stafford, Gloucester and Armagh.

Enough must have been adduced, we think, to show beyond contradiction the value of manual labor, both to the patients themselves and to the institution. But in an establishment of this kind there will always be found some patients whose station in society or previous habits have been such as not to have called forth exertions in such occupations, and who may, therefore, be indisposed to labor. For such patients, employment of another kind must be found, both bodily and mental.

AMUSEMENTS.

At Glasgow they have provided a billiard table and bowling green. They have also a well-selected library, and several of the periodical publications and newspapers are taken in. They have constantly music parties, the patients being the performers, while the other patients are admitted as auditors, and listen to the performances with great delight. (Third report.) Some of them are literary characters, and spend much of their time in the composition both of prose and poetry, some very pleasing specimens of which are to be found in the different reports. Of late a manuscript newspaper has been compiled and circulated among the patients which has given them great satisfaction. (Twenty-second report.) In addition to these sedentary occupations, other active employments have been introduced. At the McLean Asylum, in the daytime, many are occupied in bowling, quoits, throwing the ring, etc., and in the evening they assemble

for dancing, marching, etc. It matters little what the employment or occupation may be, so that it is constant and varied, for the time has come, as Dr. Lee observes, "when to allow a man to indulge his reveries in idleness until he has sunk into a state of confirmed insanity will be considered, as it deserves to be, a gross and cruel neglect of duty." (See Appendix.)

RELIGIOUS WORSHIP AND INSTRUCTION.

The subject which we have next to bring under Your Excellency's consideration is one with respect to which there is on all hands a perfect agreement, viz: the importance of introducing religious worship and instruction into every asylum for the insane. On this point there is not the slightest difference of opinion; all concur in pronouncing it a measure of great and indispensable importance. From the different reports and other works before us we shall select some of the passages which relate to it.

"As to religious instruction," says an anonymous letter on the treatment of lunatics, "it is not an experiment of yesterday, for the judicious religious instruction of those who are recovering has been in use a great number of years at Bethlem Hospital under two successive chaplains; nor did that hospital adopt the plan until such accumulated evidence poured in from all England and Scotland as could not be resisted. (The last returns gave a proportion of 77 under religious instruction out of 220 then in the house.) The same system is pursued at Hanwell (the Middlesex County Asylum), and indeed spectators have often observed that the behavior of the insane during public worship is such as need not fear a comparison with that of the most sane congregation wherever assembled. I have known cases in which the highest possible comfort has been administered by the chaplain, both in health and sickness, to the poor patients, whose gratitude has been expressed down to the latest opportunity. Indeed, when we consider how frequently it happens, that much wandering will appear on a given subject, while in all cases the mind will preserve its tone, it would be neither philosophic nor Christian to withhold a remedy of God's own providing, in those cases, where no particular reason for doing so is to be found."

In the sixth Glasgow report is the following very interesting passage: "In compliance with the wish of many of the patients a sermon, with the usual forms of divine service, as in church, was preached in the asylum. The same service has been repeated on the evening of every third or fourth Sabbath since that time. About 50 of the patients have usually attended and have invariably behaved with the utmost decorum. At the close of the first of these interesting meetings one of the boarders of superior rank respectfully approached the clergyman and gratefully thanked him "for his kind condescension in preaching to the unfortunate inmates of the asylum," adding that he himself felt "peculiarly gratified that now he was thought worthy to attend divine service."

"Whatever opinion may be entertained of the probable effect of these sermons, there can be no doubt that merely to arrest the attention of the insane has often no small influence in restoring reason. In a person at

large and receiving highly varied and strong impressions almost every moment of his waking hours the service of the Sabbath may not excite very strong interest when compared with many of the daily occurrences. But to one who is shut up from the world and with whom every day is alike the breaking in upon the ordinary routine by a set of observances, at once singular and solemn, cannot fail to make impression and to fix attention in a high degree. Accordingly, the fact is, that during all the sermons which have hitherto been preached the most loquacious have remained silent, the restless have become composed, and all have kept their eyes steadily fixed upon the clergyman, as if anxious to hear and to appreciate every word of his discourse. Besides on that day when the maniac is debarred from his usual sports and employments, with no resource but the society of beings like himself, he is too apt to lounge away the hours in listless apathy, brooding over his own vain imaginations; or perhaps to give loose thought to the mischievous propensities engendered by his distorted conceptions. Any employment tending thus to break in upon uniformity and innocently to occupy idle time would be useful. But how much more benefit may we not expect to accrue from an employment which is naturally soothing and consolatory? Independently of the sermon itself, the assembling together for one purpose, and that purpose of the most solemn kind—the tendency which worship has to carry the mind back to earlier and more happy times—the meeting of voices in sacred melody, rendered interesting by various associations, are all calculated to throw a gleam of peace over the most perturbed spirits. And who knows but by striking upon these chords of feeling, which vibrated often in happier days, some long lost train of recollection may rush over the soul, sweeping away those phantoms of lunacy which often veil the past from the present man, and blend with every ray of hope the gloom of despondency?"

After a trial of four years the directors of the asylum, satisfied with the beneficial results of the plan, "resolved to appoint a chaplain who has regularly performed divine service in the asylum once a fortnight." "The patients who are selected to attend are usually about 70 in number, and either are convalescent or have manifested a remission of their malady. Liberty to attend is at first granted as a test of improvement and always as a favor. They behave with great decorum, and several of them who are still under some degree of excitation appear to derive benefit from the restraint which they impose upon themselves during divine service."

"We have now for several years had experience of the practice of preaching in the asylum, and far from attempting to determine the precise degrees of the powers of attention, recollection and judgment which are necessary to qualify human beings for joining in public worship, we are rather disposed to allow full weight to the sentiment conveyed in the following extract from an interesting letter addressed to the chaplain by one of our patients: 'We know of no law whereby the prayers, entreaties, tears and sorrows, even of lunatics, are debarred from the throne above.'"

After another trial for the further space of four years, the directors resolved to build a chapel, with seats to accommodate 100 persons. This

building is finished in a plain but neat style, and forms a very commodious place of worship. It was opened for divine service 6th July, 1828. (See fifteenth report.) Satisfactory as this testimony is to the value of religious worship and instruction, that of the directors of the McLean Asylum to the same point is equally strong.

"We have introduced," says the report, "religious service on the Sabbath. For eight months from 30 to 40 have daily attended on our family worship, and in no instance has there been any disturbance, nor have we known of any injurious effect; on the contrary, the influence has been highly salutary, and many who have recovered have spoken of these exercises as having contributed to their restoration."

"The experiment of allowing the patients to attend the worship of the family has far exceeded our expectations, and has been attended with the best results. Ninety-five out of 137 have attended upon these exercises, and a large part of them with great regularity. It has been with few exceptions entirely voluntary. It is regarded as a privilege, and as such is eagerly sought. The slightest irregularity of conduct has been followed by the omission of the individual from the list for a few evenings, and this deprivation has secured order and propriety. Patients who could not otherwise be kept decently clothed have exerted their powers of self-control to be allowed to attend. One female, who was habitually noisy, obscene and profane, after having repeatedly solicited this privilege, was told one morning that she should attend that evening if she kept quiet during the day. She provided herself with a stocking, which she rolled into a ball, carried in her hand, and pressed into her mouth whenever she felt her propensity active, and thus guarded she attended prayers and conducted herself with becoming propriety; she is now a regular attendant upon these and other exercises of the family; is quiet, industrious and rational."

And Dr. Lee, the superintendent, in his manuscript report addressed to the Rev. Lewis Dwight, says (see Appendix): "We assemble them every evening for family worship, which consists in reading a chapter of the Bible, and singing two hymns and a prayer. We have religious service performed by a clergyman once a fortnight in our house, which we attend. You can testify to the order and attention which characterize these meetings, and I can testify to their salutary influence; they carry the mind back to the memory of other and better days, and they cause them to recollect the infinite goodness and all-wise providence of God."

The third report of the trustees of the State Lunatic Hospital at Worcester to the Governor and Council observes that "the introduction of religious exercises has been thought important, and as such is submitted to your consideration. The subject of a chapel has been suggested and strongly recommended by the acting Governor. The reading of the Scriptures and appropriate prayers on week days and such a discourse and other religious teaching as would be suitable on the Sabbath would be beneficial by a moral and mental exercise."

"The Sabbath is at present the most tedious of the days. Amusements are laid aside, and labor is suspended; a large proportion of the inmates spend the day in idleness, and often in a state of irritation not at all conducive to comfort or recovery. If a proportion were suffered to visit a chapel daily others would be desirous of the same privilege, and thus a motive to quiet and self-control would be constantly active, and would not fail to produce a favorable influence."

CURE OF THE DISEASE.

There is now only one point which we think it necessary to bring under Your Excellency's consideration—the importance of asylums for the cure of the disease. It is the decided opinion of most persons who have investigated the subject that insanity is on the increase. But at the same time it is consolatory to observe that the disease is not now considered of so formidable a nature as it used to be, because it is found easily to yield to judicious treatment timely applied. We shall select some passages from authors of established credit, under the impression that the testimony of persons experienced in the disease will have more weight than any speculations of our own.

Dr. Abercrombie (p. 21) says that "an important rule in the moral management of the insane will be to avoid every allusion to the subject of their hallucination, to remove from them everything calculated by association to lead to it, and to separate them from scenes and persons likely to recall or keep up the erroneous impression. Hence, probably in a great measure arises the remarkable benefit of removing the insane from their usual residence, friends and attendants and placing them in new scenes and entirely under the care of strangers. The actual effect of this measure is familiar to every one who is in any degree conversant with the management of the insane. That the measure may have its full effect, it appears to be of importance that the patient should not, for a considerable time, be visited by any friend or acquaintance; but should be separated from everything connected with his late erroneous associations. The danger also is well known which attends premature return to home and common associates, immediate relapse having often followed this in cases which had been going on for some time in the most favorable manner."

"It is well known," says the author of the article on insanity in *Brewster's Encyclopedia*, that even "after the diseased state has been corrected, and the symptoms alleviated by the judicious use of medicine, a slight occurrence tending to irritate the mind is sufficient to destroy in one moment all the benefit produced, and to give rise to an immediate increase of violence in the symptoms. Moral circumstances must be attended to from the very beginning. The first and most important step is to remove the patient from his own home and from all the objects which he has been accustomed to see. His false notions and harassing impressions are associated in his mind with the objects exposed to his senses during the approach of his disease. His relations have become to him stale and uninteresting, and afterwards causes of angry irritation. The places where he has been

accustomed to feel perplexity of thought cannot be seen without in some measure reviving it. It can seldom be expected that in a private family individuals are to be found qualified for so difficult a charge as the care of a maniac. The most favorable situation is a retirement, where the patient will be surrounded by objects which have a composing influence. For some time after he is apparently well he should be kept at a distance from his friends. His importunities and those of his connections for a premature restoration to his family ought to be firmly resisted till his recovery is well established."

One of the most striking effects of the approach of insanity is the disgust which the patient conceives against his own family; while a gradual return to former habits and attachments is one of the surest marks of returning reason. Dr. Rush, of Philadelphia, eminent both as a physician and an author, mentions "a young lady who had been for some time confined in a lunatic asylum, and had shown for several weeks every mark of a sound mind, except one—*she hated her father*. At length she one day acknowledged with pleasure the return of her filial attachment, and was soon after discharged entirely recovered."

A circumstance occurred in the Manchester Asylum which forcibly illustrates this principle. "A maniac was visited by his wife and two children, one of whom gave him an apple; this circumstance awakened his sensibility and made him melt into tears. The scene was observed by the worst patient in the house, a woman, whom the mere sight of her attendants rendered furious, who loudly accused every person who came near her of the most shocking crimes; denounced every sort of threatening against them, and went over their features and dress in order to turn every part of them into the most poignant ridicule; and all this with a rapidity which no interposition of others could interrupt. Her ferocity was immediately subdued, and she wept along with that unfortunate parent, recollecting, no doubt, the children whom she herself left at home. From that day she made speedy advances to a state of perfect composure, and in a few weeks was dismissed cured. It was fortunate that she had not, in the first instance, seen any of her own children. In that case, the association of ideas might have recalled to her mind those feelings of passionate irritation with which she was affected in the beginning of the disease; whereas the feelings of maternal affection, being excited free from such associations, had time to acquire greater influence, till they became sufficiently powerful to fortify her against those passions by which they had been supplanted."

The importance of asylums for the reception of the insane being thus fully established, we have now to show the success which has attended the treatment of them, particularly when the patients have been sent to them in an early stage of the disease. And here the long series of reports of the Glasgow Royal Asylum, extending as they do over a period of 20 years, will be found invaluable. Upon a careful examination of them it appears that in the 20 years from 1814 to 1834,

The number of patients admitted was.....	1621
The number of patients re-admitted after relapse, being 3 per cent	51

Total 1672

The number of patients dismissed was—

Cured	716
Relieved	415
By desire of friends.....	182
Unfit	38
Who died	181

1532

Remaining in the asylum, 1st January, 1834..... 140

To show the probability of a cure, if the disease be properly treated in its early stage, it will be proper to divide the cases treated into old cases and recent cases.

Of the above 1672 cases, 1641 were treated with the following result of cures:

552 old cases, with 75 cures, about $13\frac{1}{2}$ per cent.

1089 recent cases, with 555 cures, about 51 per cent.

At Worcester, the proportion is this, for 1834:

60 old cases, with 9 cures, about 15 per cent.

52 recent cases, with 42 cures, about $82\frac{1}{2}$ per cent.

At the McLean Asylum:

20 old cases, with 3 cures, about 15 per cent.

39 recent cases, with 32 cures, about 82 per cent.

In the fifteenth Glasgow report there is a table which shows that in the three previous years 95 patients had been discharged *cured*, the duration of their diseases being as follows:

Under 3 months.....	17	
“ 6 “	30	
“ 9 “	17	
“ 12 “	19	
—	83	in the first year of the disease.
“ 15 “	5	
“ 18 “	2	
“ 21 “	3	
“ 24 “	2	
—	12	in the second.
	95	

And in the seventh report it is stated, that of 13 patients admitted within two weeks of their becoming respectively insane, *all* were dismissed cured within *three months*.

It will not be uninteresting if we insert a table compiled from the returns from 1821 to 1834, a period of 13 years, of the number of deaths and the diseases by which the deaths were respectively occasioned.

Apoplexy	58
Exhaustion	33
Consumption	24
Dropsy	6
Fever	5
Diarrhœa	4
Typhus	4
Erysipelas	3
Abscess	3
Diseased intestine	1
Diseased uterus	1
Uterine hæmorrhage	1
Inflammation of lungs.....	1
Water in the chest.....	1
Suffocation	1

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While we regard with satisfaction the great success which attends the judicious treatment of the insane, it is a most pleasing consideration that the treatment which they meet with in asylums of reputation, salutary as it is, and conducive to their recovery, is of so mild and agreeable a character that the patients can and actually do look back upon it with pleasure and satisfaction. The severe discipline of former times has given place to a system whose chief characteristics are kindness and mildness. As Dr. Lee observes, "we have no machinery; we neither drown nor torture them into reason; we meet them as friends and brothers, cultivate their affections, interest their feelings, rouse their attention, and excite their hopes" (see Appendix), and the result of such treatment is what might be expected. "Patients," says the twentieth Glasgow report, "who have been long in the house have become so attached to it, and so sensible of the kind treatment which they have experienced in it, that they have actually refused to leave it when their removal was proposed to them. Everything is done to promote the general comfort, and the great quietness of our asylum, so often remarked by visitors, is in no small measure the consequence of that degree of personal liberty which our patients enjoy, and to the tenderness observed in the nature and use of the means of restraint when such means are indispensable." "Patients (fourth report), instead of reflecting on the asylum as a prison, in which penance must be undergone and punishment suffered, look to it as a place of refuge, to which they flee of their own accord whenever they begin to feel themselves in danger."

Of this some very striking instances are recorded. A woman returns and avoids a threatened attack. A man finding his head very much disturbed hurried up to the asylum, requesting immediate admission. He

soon became very outrageous, but the disease having been checked in the very commencement, its violence soon subsided, and he was quickly restored to his family. A woman liable to attacks from three to six times a year remains at her own desire, preferring the asylum as her permanent abode; and is of the greatest use, by counselling, assisting and soothing other patients, over whom she has great influence. Another woman, experiencing some of the precursory symptoms of lunacy, privately left her friends, and walked back to the asylum, a distance of many miles. A young man, also feeling the well-known precursory symptoms of the malady, travelled on foot a journey of 40 miles, back to the asylum, bringing money to pay for his board in his pocket. Another, who was dismissed relieved, but not cured, makes the road to the asylum his daily walk.

Indeed, so comfortable is the general condition of the patients that, while some are impatient to leave the asylum, others express the strongest aversion to leave it at all. "The occupations and amusements which they find there are decidedly preferred to the cares and concerns of their own families, a predilection of a very dangerous nature, requiring strict attention and very careful management." Some curious instances of this evil are to be found in the different reports, and some more curious still of persons, both male and female, counterfeiting lunacy in order to gain admittance to the comfort of the asylum.

This, our report, with its appendix, we humbly submit to Your Excellency.

Dated this 2d day of December, in the year of our Lord 1836.

CHARLES SIMONDS,
JOHN ROBERTSON,
W. H. STREET,
THOS. BARLOW,
THOS. PADDOCK,
FREDERICK COSTER,
Commissioners.

APPENDED LETTERS.

LETTER OF THE COMMISSIONERS TO WILLIAM CRANE AND L. ALLAN WILMOT, ESQUIRES.

SAINT JOHN, NEW BRUNSWICK, May 2, 1836.

GENTLEMEN: Having been appointed by His Excellency the Lieutenant-Governor, in compliance with the wishes of the House of Assembly expressed in their address of February 11, commissioners to "ascertain the most eligible site, near the City of Saint John, for a provincial lunatic asylum, together with a plan of the same, and an estimate of the probable cost of land, and the erection of such buildings, etc., as may be required for the same; and also any information they may be able to obtain relative to the management of similar institutions," we take the liberty of requesting the favor of your assistance, during your approaching visit to England,

in the business of the delegation from the House of Assembly, in procuring for us such information relative to the management of insane persons and the places provided for their reception as will enable us to make a satisfactory report to the Lieutenant-Governor for the information of the Legislature.

At present we possess but a very scanty portion of information, but from it, such as it is, we are led to infer that important improvements have of late been introduced into the moral treatment of the insane in the almost total disuse of the severe discipline which used formerly to be practised; in the separation of the different classes of patients, so that the mild and peaceful among them may not be harassed by the ravings of the ungovernable; in providing for them separate sleeping apartments; in affording to all sorts of persons accommodations and attendance suitable to their rank in society, and such as they may have been accustomed to, and may again enjoy, should it please God to restore them to their reason; in the introduction of systematic occupation and amusement, both bodily and mental; and in providing for them religious instruction and the regular performance of divine service. We will thank you to procure for us such published works treating upon these subjects as will enable us to describe them in our report, supporting our description by such evidence as will be required by and prove satisfactory to the Legislature. It appears to us that the report of the committees of both houses of Parliament might be useful, particularly the reports of the committees of the House of Commons for considering the regulation of mad houses. The last two or three acts of Parliament on this subject, as 39 and 40 Geo. III C. 94; 43 Geo. III C. 75; 1 and 2 Geo. IV C. 114; 9 Geo. IV C. 40, 41, may be of assistance in drafting the bills which it will be necessary to submit to the Legislature.

We also wish for information as to the best and most effectual means of making provision for carrying into effect these improvements in the usual treatment of the insane, both as it respects the plan and construction of the buildings to be erected, and otherwise, bearing in mind that the proposed institution must be both a hospital for the curable insane as well as an asylum for lunatics. What means of restraint and enforcing discipline are made use of; by what means and in what manner the classification and separation of the patients are accomplished; what sort of accommodation is provided for them by night, as well as by day; in what manner accommodation is provided for the different classes of patients, suitable to their rank in society; what bodily occupations are provided for them; what means of giving them healthful exercise, both indoors and without; what bodily amusements; what mental occupations; what mental amusements. Dr. Abercrombie speaks of "a course of history, the leading events being distinctly written out, in the form of a table, with the dates"; if any works of this description have been prepared so, or otherwise, for their amusement and instruction, what these works are; and what provision is made for securing for them religious instruction and consolation, and the regular and proper performance of divine worship. It has ap-

peared to us that a description (and perhaps a plan) of some one or more of the county lunatic asylums erected under the provisions of the Act of 9 Geo. IV might be useful to us, together with the returns from Bethlem Hospital (the return from this hospital in 1831 or 1832 gave 77 out of 220, exactly one-third, as being under religious instruction), also the reports of the Middlesex County Asylum at Hanwell, those of the Glasgow Lunatic Asylum, and other similar establishments.

We have come to the conclusion, considering the number of insane persons at present in the province, which we believe amounts to near 50, that it will be necessary to erect a building adequate to the reception and proper accommodation of about 80. We wish to be informed what number and description of officers and assistants such an establishment would require; and, also, what would be considered the best means of warming the various apartments which may at once be safe to the patients and the building and suited to the severity of our climate.

Upon all these points, and upon any others connected with the subject, which, from our imperfect acquaintance with it may not have occurred to us, but may in the course of your enquiries suggest themselves to you, we shall be greatly obliged if you will procure for us as much useful information as may be accessible to you.

We have the honor to be, gentlemen,

Your obedient servants,

(Signed) CHARLES SIMONDS,
WILLIAM H. STREET,
JOHN ROBERTSON,
THOMAS PADDOCK,
THOMAS BARLOW,
FREDERICK COSTER,

Commissioners.

To William Crane and L. Allan Wilmot, Esquires,

Delegates from the House of Assembly.

NO. 2.

LETTER FROM DR. THOMAS G. LEE, SUPERINTENDENT OF THE McLEAN ASYLUM, CHARLESTOWN, TO THE REVEREND LEWIS DWIGHT, BOSTON, SECRETARY OF THE PRISON DISCIPLINE SOCIETY.

McLEAN ASYLUM, June 28, 1836.

DEAR SIR: I this morning received your note, requesting me to state my views of what should be sought in the location of an insane asylum. I improve the first leisure to give you an answer. There are objects to be sought for in connection with an asylum for the insane which I consider of the greatest importance, and as they should influence the location, I will trouble you with my views upon these matters before I enter upon that subject. Almost every writer upon the treatment of the insane has spoken of the advantage of occupation and labor as contributing to their recovery, and yet the institutions in this country are very deficient in the

means for affording it. The three public institutions in New England have not 20 acres of land attached to each establishment; no one ought to have less than 100 acres, and even that number would be too small should there be 150 or 200 patients. Pasture, meadow and tillage land should be had in abundance; the farm should be well stocked with cattle. Sheep and swine raised for the use of the institution should be fed from the produce of the farm; corn, potatoes, grain, flax, all kinds of garden sauce, etc., should be raised by the labor of the patients. This is not all; there should be dairy rooms, workshops and store-houses, all arranged for the particular object of employing them; they should be engaged (in times and seasons for the several labors) in cutting, making and loading hay; planting, sowing, cultivating and getting in garden and field crops, collecting and storing away fruit, shelling corn, dressing flax, tending stock, milking cows, making butter and cheese, knitting, sewing, etc.; in fine, all the labors of a large farming establishment, besides various mechanical labors. I confidently anticipate the time when all these things will be performed in our insane asylums, and when arrangements made for such labor will be considered as indispensable as the strong rooms have been for the refractory in times past—this is not mere speculation. In the institution over which I have the honor to preside we have within the last eight months illustrated in our experience not only the *practicability*, but the great *utility*, of labor. Our farming, gardening, and the sawing, splitting and piling of all the wood, besides mechanical labors, have been done by the patients with the assistance of the attendants, and our only difficulty has been that we have not been able to find enough for them to do. The females have also been engaged in domestic labors. Useful labor is always the best employment; but there are some who will not be thus engaged; these must be occupied, and those that do work should have relaxation, and besides the various amusements and diversions which can be enjoyed within doors and in the yards, they should be taken to ride and walk into the country, sent out on fishing excursions, skating, etc. The occupation should be as constant and varied as possible, and the time will come when to allow a man to indulge his reveries in idleness until he has sunk into a state of confirmed insanity will be considered, as it deserves to be, a gross and cruel neglect of duty. The order of the day is onward. Our old institutions must and will provide the means for facilitating the employment of these patients, and if with all the light and knowledge which can now be obtained our legislatures and other bodies of men engaged in establishing new institutions neglect to provide these facilities for restoring the insane, they will inflict a sore evil upon humanity and deserve the severe reprehension of the public. The State of New York, with all its vast resources, ought to set the example, and I hope, if you visit the Legislature as you propose, you will urge it by every motive which can appeal to their humanity and also to their ambition. Let them establish an institution with these advantages, and it will be the pride of their state and the boast of their philanthropy.

In the location of an insane hospital, as a first consideration, I should have in view the accomplishment of these objects: It should not be too near a large city, nor within half a mile of any street which is or will likely become a populous part of the town. The farm should be so situated that an observer at the hospital can see every part of it, that any difficulties among those at work or engaged in sports may be seen and prompt assistance afforded. The location should be so elevated as to command a full view of the surrounding country. It should be in a region where the scenery is varied and delightful, a navigable river bearing upon its basin the varieties of water craft; public roads thronged with the evidences of life and business, but not so near as to be exciting; a populated and cultivated country should be all in view. These objects will afford diversion and interest, excite conversation, and give constant proofs that they are in a world of hope and among beings who are engaged in the every-day affairs of life. The grounds should be ornamented, and everything about the establishment should give evidence of care and comfort. The buildings should be in parallel lines and as nearly in a right line as they can be and secure proper ventilation. The plan of the buildings at Worcester is the best I know of. If each block appropriated to the patients had been only two-thirds of its present length the advantages of sub-division and classification would have been much greater. These are objects of great importance. The objection to having the buildings situated diagonally, or at right angles with each other, are that sounds will thus be communicated from one building to another, patients see each other from opposite windows, overlook each other's yards or courts, and make signals from one to another. A gallery should have its separate courts. In adopting the plan and locating the building regard should be had to its extension from time to time as the wants of the public may require. The following plan will illustrate my views:

I should prefer to have the ward buildings only two stories high. The workshops and lodges should be only one story, and lighted only on the sides facing away from the institution; they should be easy of access, and the plan in the drawing is the best which suggests itself to my mind. The communication between No. 3 and the lodges should be by covered ways, as patients conveyed there are in a state of excitement, and their exposure should be avoided. I would have the rooms in ward building No. 1 largest and best furnished, and appropriated to the best class of patients in the quiet and convalescent state. No. 2 should be better than No. 3, and so on. In No. 2 should be the offices of supervisor and the receiving rooms for new patients; here they should be seen by the physician and then located according to their state. To have patients received in the central building is a great annoyance, not only to the family, but to those convalescent patients who are permitted to be in the family of the superintendent. The receiving rooms for visitors should be in the center building; here are the offices of the physician and steward, the family residence, kitchen, etc., and there should be a large room for family worship and for religious service on the Sabbath, and for such other occasions as may be

required. There should be no direct communication with the kitchen by the attendants and nurses; but it should be by porters, one for each wing, who should attend to all signals, which might be given by a bell.

If each gallery accommodated but 10 patients there would be only 20 to a building; the lodges would each contain 8; in all 138. If it was found difficult to get an appropriation to erect a sufficient number of buildings only two stories high, I would yield to that point; the same number of blocks would then accommodate 196; but I would insist upon having the number in each gallery limited to 10, as necessary to the comfort and welfare of all concerned.

The enclosure should be surrounded by a fence to keep company out, not to keep patients in—this must be done by the vigilance of the nurses and attendants. A high wall would give it a prison-like appearance, and would not answer the purpose of security. The road in front should not pass within 60 rods of the building, and the intermediate area should be ornamented with trees, shrubs, flowers, walks, etc., and on the sides and rear of the buildings should be gardens and farm; the whole should be secured, to be held sacred to the institution and its objects forever.

In the erection of buildings there are many things of high importance to be secured; your inquiry did not extend to these, but as I know you will be pleased with any facts which relate to the comfort of the inmates, I will enumerate some of them. Each room and gallery should be well ventilated by flues passing upwards and opening under the roof and then into the air. Each story should have a sick room, wash and bathing rooms, a water closet and a laundry, where the vessels can be emptied, lamps cleaned, mops, pails, cleaning brushes, etc., kept; a day and dining room. In the basements under the latter should be the porters' lodge with a sliding closet or dumb waiter, by which food may be raised to the stories above. The communication with the house and kitchen should here be made by means of the porters. A communication from the center to all the other buildings is absolutely indispensable; there should be a well-lighted passway in the basement communicating with the porters' lodge, and with the stairways the galleries should communicate. The rooms in ward building No. 1 should not be less than 12 feet deep by 9 feet wide. The rooms in Nos. 2 and 3 should not be less than 10 feet deep by 8 feet wide. The hall should be at least 12 feet broad, extending through the building and lighted at both ends by a large window. In the partition there should be an unglazed cast-iron sash, painted and made to correspond in size and appearance with the window. A door should open from the passways into the attendants' room, and if the passways be only 3 or 4 feet wide there will be space for another door, so that the room may be entered immediately from the hall. The rooms immediately adjoining should be appropriated to the sick and suicidal; it should have no entrance immediately from the hall, but be entered by a door from the attendants' room, a window with a fixed iron sash, and a movable glazed sash, which can be raised into the vaulted ceiling, might also be placed between the two rooms for the advantage of looking in

upon the sufferer without always opening the door, in cases when constant attention is not required.

There are many details which can but be communicated in conversation. If anything that I have written requires explanation I shall be most happy to give it, or any assistance in behalf of these institutions and in the diffusion of correct ideas relating to their management. The day has gone by for mystery in relation to the treatment of the insane; we have no machinery; we neither drown nor torture them into reason; we meet them as friends and brothers; we cultivate their affections, interest their feelings, rouse their attention, and excite their hopes; we cheer the desponding, soothe the irritated, and repress the gay as far as possible. We occupy all in doing this; we consult their tastes and feelings, their former habits and pursuits; games of all kinds, chess, checkers, backgammon, cards, ninepins, quoits, battledore, graces, reading, writing, walks, rides and field sports are some of their occupations. We invite the quiet and convalescent into our family, seat them at our table and give weekly parties for their amusement and benefit. On such occasions we engage and participate with them in marching and dancing; we assemble them every evening for family worship, which consists in reading a chapter from the Bible and singing two hymns, and a prayer. We take them with us to church and we have religious service performed by a clergyman once a fortnight in our house, which they attend. You can testify to the order and attention which characterize these meetings, and I can testify to their salutary influence; they carry the mind back to the memory of other and better days, and they cause them to recollect the infinite goodness and all-wise providence of God. Our medical treatment is also founded upon principles which equally appeal to the philanthropical and common-sense notions of every intelligent man.

I thank you for the interest you have manifested in our institution. Visit us whenever you please; we shall always be happy to see you, and take you over our establishment, show you our arrangements, and make you acquainted with the practical operation of the system I have been describing.

With much respect,

I am yours, etc.,

THOMAS G. LEE.

Rev. Lewis Dwight, Boston.

NO. 3.

LETTER FROM DR. H. A. GALBRAITH, SUPERINTENDENT OF THE GLASGOW ROYAL LUNATIC ASYLUM, TO WILLIAM HENRY DOBIE, ESQUIRE, GLASGOW.

GLASGOW ROYAL LUNATIC ASYLUM, 10th Sept., 1836.

DEAR SIR: In answer to the questions handed by you to me, I beg leave to state that the whole extent of ground presently belonging to the asylum is about nine imperial acres, of which one-half is occupied by the buildings and airing yards and the other as a fruit and vegetable garden.

There are three airing yards for males, that for the lower class being laid out with fine gravel and having a covered walk 150 feet long by 10 feet broad to protect the patients from sun and shower. The other two for the upper classes (one of which contains what was originally intended for two and having a bowling green) are laid down in grass, and intersected with gravelled walks and borders for shrubs and flowers. For females there are also three airing yards, corresponding to those of the males, with the exception of a washing, in place of a bowling green.

The garden, which affords much employment for our working patients, as well as exercise and recreation to others, is also intersected in all directions with gravelled walks and flower borders, and the whole is surrounded as well as subdivided by strong stone walls, upwards of 12 feet high.

The building, which stands nearly in the center of the airing grounds, consists of three principal floors, sunk floor and central attics, and contains as follows:

Single sleeping rooms for male and female patients...	105
Large day rooms for male and female patients.....	12
Airing galleries, 75 feet by 7½ feet, for male and female patients, with water closet and water pipe in each	12
Airing galleries for frantics, 30 feet by 7 feet.....	4
Dormitories for convalescent, quiet and cleanly patients of the lower class, with 30 beds for males and 26 beds for females, and clothes drawer to correspond to number of bed, the space for each being 10 feet by 6 feet	2
Matron's rooms on ground floor	3
Committee room, office, library and billiard room....	4
Workers' rooms	4
Sleeping rooms in attics for matron's assistants and unattached servants	7
Steward's and store rooms in sunk floor	7
Kitchen, scullery, laundry, etc.	5
Baths, hot, cold and shower in each	3
Furnace rooms and coal stoves	4
Chapel, tool room and joiners' shop	3
Visitors' rooms for patients' friends	3
Total	178

The superintendent's house is detached from the other buildings, has a garden, and consists of nine apartments, exclusive of water-closet, cellarage, etc.

The number of patients of all ranks which can be accommodated is 164, and there is at present in the establishment 163. For past years see the annual reports.

The average expense of the various classes of patients, exclusive of management, is nearly as follows:

1st rate of board per week	4s. 2d.
2d rate of board per week	7s. 4d.
3d rate of board per week	9s. 6d.
4th rate of board per week	12s. 3d.
5th rate of board per week	17s. 6d.
6th rate of board per week, including the wages and keep of a private servant	33s.

For salary to physician and superintendent, who is also resident surgeon and apothecary, see annual reports. The office of surgeon may almost be accounted nominal, as it is only in extraordinary cases that he is called, and these sometimes not occurring in 12 months, he has no service to perform and no pay.

The keepers and other domestics of the establishment, exclusive of the matron and her assistants, amount to 25 in number, and are paid as follows:

	Per annum.	
	£	s.
House steward	46	0
First male keeper	36	0
Three male keepers, each	30	0
Three assistants	24	0
First female keeper	18	0
Three female keepers, each	14	0
Two assistants	10	0
Cow-keeper and fireman	24	0
Gardener and joiner	50	0
Cook, £12 12s.; assistant, £6 6s	18	18
Laundress and two assistants	21	0
Matron's maid and scullery maid	13	0

All the above have bed, board and washing in the establishment, with the exception of the gardener and joiner, who reside with their families.

On the subject of moral treatment, so much depends upon observation and acquiring a competent knowledge of the particular cases, that little beyond the mere outlines can here be given, and even these in a moderate compass but feebly.

The general plan, however, is, so far as possible, to divert the patient's mind from the subject or subjects of hallucinations, and to engage him in some mental exercises or amusements at stated times, and particularly to associate him with others, by whom his attention may be occupied, that he may have no time to indulge in or brood over his own illusions. Manual labor or exercise in the open air (particularly) or otherwise, according to the rank and taste of the patient, and light, cheerful conversation, with kindness and attention to all reasonable requests, and great and prudent firmness in resisting what is otherwise, are of the greatest

consequence in treating the insane, never rudely contradicting or even arguing on their illusions, but gently pointing out contradictions when such occur, or showing by an occasional well-timed remark that their conclusions are not supported by the evidence adduced; this has often a beneficial effect, and not a few date the dawn of convalescence from observing the extravagant conduct and hallucinations of others with whom they are associated, or having these simply pointed out to them.

Whilst it is necessary by every means in our power to encourage and stimulate the gentle, the timid, the lethargic and the despondent, it is equally so calmly but firmly to repress the rude, the overbearing and the boisterous, and indeed to exhibit to all, not only the determination, but the power to protect and control them when necessary.

In reference to the accompanying plan of the building, it may be remarked that, although all the wings are of equal length, yet the sleeping rooms in the back ones are more numerous but smaller than in front, the average size being respectively 12 feet by 8½ feet in front, and 12 feet by 6½ feet in back, and attached to the extremity of the latter are the dormitories formerly noticed with the sitting apartments.

Thus I have endeavored to give you concise but comprehensive answers to the various questions put for the information of your correspondents at Saint John.

I am, with regard,

Your most obedient,

(Signed) H. A. GALBRAITH.

To William Henry Dobie, Esq., Glasgow.

NO. 4.

LETTER FROM DR. PETERS, SUPERINTENDENT OF THE TEMPORARY LUNATIC ASYLUM AT SAINT JOHN, TO THE COMMISSIONERS.

SAINT JOHN, November 28, 1836.

GENTLEMEN: I have had the honor of receiving your letter requesting some information respecting the temporary lunatic asylum in this city under my charge, and take the earliest opportunity of replying to it and furnishing such particulars as seem to be called for by the nature of your enquiries.

When I was put in charge of the poor establishment in this city it consisted of the almshouse, gaol and workhouse, with the outdoor poor. There was no separate place provided for the safekeeping of the pauper lunatics. At that time, as they still are in other counties of the province, they were confined in the gaol under the warrant of a magistrate as unsafe to be at large; and there I found several unfortunate men confined in the same room with the felons and other criminals, some of them perfectly naked and in a state of filth, which, though under the circumstances unavoidable, was yet disgraceful to humanity.

The confining convicts and lunatics together in the same apartment is a practice utterly indefensible except on the ground of absolute necessity. To both parties it is cruel and unjust. It certainly formed no part of the sentence of the convicts that they should be shut up, during the term of their imprisonment, with maniacs, sometimes furious and dangerous, and at all times offensive from filthy habits, which, if neglected, they are sure to acquire; while to the poor unhappy lunatics nothing can well be conceived more injurious than such a confinement and the usage which they were sure to meet with.

I felt it my duty to call the particular attention of the overseers of the poor to the state of the case, and the lunatics were accordingly removed from the gaol and placed in the almshouse. But though this arrangement certainly improved the condition of the poor lunatics, the occupation of the almshouse, at all times overcrowded by persons of that description, was found exceedingly inconvenient, and attended with very unpleasant consequences. To obviate these inconveniences it was determined that an application should be made to the Board of Health for leave to fit up and occupy the cholera hospital for a temporary asylum. Permission having been given, the lower part of the building has been divided into two sides, one for the males and the other for the females. For the purpose of separating as much as possible the more violent from those who appear inclined to conduct themselves in a moderate way, these sides have been sub-divided; the male side into a day room (if a mere passage can be so called) and five sleeping rooms; the female side into a similar day room and four sleeping rooms. These divisions have been effected by mere temporary partitions, and, though greatly superior to anything which these unfortunate persons have ever before enjoyed, the place is altogether insufficient either for their comfortable residence, their safekeeping or their proper treatment.

This asylum has now been eight months in operation, and 22 patients have been admitted into it. Of these 9 have been discharged cured, 1 has died and there are now 12 remaining. Of these 12, 6 are idiots, 2 of them reduced to that state by the frequent recurrence of epileptic fits; 1 was born so, and the other 3 have been in that state for some years, though without any assignable cause, so far as I have been able to ascertain from their friends. The restoration of any of these 6 is, I think, hopeless; but were there any occupation for them, their services might be turned to very good account; so far as mere manual labor is concerned, they would be nearly as efficient as if their intellect were not impaired, and their health would be materially improved. Of the remaining 6, 3 will, I think, recover; the recovery of the other 3 is, to all appearances, very doubtful.

Adopting the system of classification in practice at the Glasgow Royal Asylum for lunatics, the number and description of the cases admitted and the result of the treatment will appear as follows:

Classification of cases when admitted.	How dismissed.				State of those remaining.			Total.
	Cured.	Relieved.	By desire.	Unfit.	Died.	Improved.	Continue the same.	
Maniacs	6	0	0	0	0	3	2	11
Maniacs, furious	1	0	0	0	1	0	1	3
Melancholics	2	0	0	0	0	0	0	2
Melancholics, irascible	0	0	0	0	0	0	0	0
Imbecile	0	0	0	0	0	1	4	5
Fatuous	0	0	0	0	0	0	1	1
	—	—	—	—	—	—	—	—
Total	9	0	0	0	1	4	8	22

Two of the above were readmitted after a relapse.

Of the above 22, 7 were old cases and 15 recent cases, with the following result of cures:

7 old cases with	1 cure, about 14½ per cent.
15 recent cases with	8 cures, about 53 per cent.
—	—
22	9

Of the 22, 5 are natives of the province and 17 are emigrants, chiefly Irish. All of them are paupers except 1, for whose board five shillings a week is charged. Eighteen of them are resident in the city; 3 in that part of the parish of Lancaster which borders on Carleton, and 1 from South Bay, in the same parish.

With regard to the conduct of the lunatics, they have generally, after a short residence in the asylum, been tolerably quiet; but some of them, from the want of proper accommodations and constant occupation, have required restraint, and one of them is so troublesome that we are obliged to keep him fastened by a chain attached to a belt round his waist. It is deeply to be regretted that we should be obliged to have recourse to so unpleasant a mode of restraint, but the man's disposition is so restless, and from want of employment or occupation of any sort he is so exceedingly mischievous, that it is impossible to leave him at large. As to the causes of the disease, as far as I have been able to ascertain them, it appears that sudden fright has been the most frequent cause of the aberration of mind among the females. The falling overboard of a fellow passenger produced it in one case, and other accidents of a like alarming nature were followed by the same results in others. And among the males, with the exception of the idiots, the affection appears to have originated very generally from the abuse of spirituous liquors—a fruitful cause of insanity, which will be very likely in this country to keep a lunatic asylum well filled with patients.

By the establishment of this asylum, temporary and incomplete as it is, I am happy to say that the condition and treatment of the unfortunate

lunatics have been very materially improved. They are now at least clean and comfortable. Of course we labor under all the serious difficulties and inconveniences which are everywhere found to arise from want of space and constant employment for them—two very essential things in the management of the insane. Of late the applications for admission have been increasing, and we have been compelled to reject several from persons who could and would have paid for the board of the patients. Indeed, there is every reason to fear that the asylum will be overrun by the pauper lunatics of the city before the provincial institution can be put into operation.

I have the honor to be, gentlemen,

Your obedient servant,

GEORGE P. PETERS.

To the Commissioners of the Provincial Lunatic Asylum.

APPENDIX B.

APPENDIX NO. II OF JOURNALS OF HOUSE OF ASSEMBLY.

REPORT UPON LUNATIC ASYLUM.

SAINT JOHN, 1st Jan., 1838.

MAY IT PLEASE YOUR EXCELLENCY: Agreeably to their request I, last year, had the honor of making a communication to the commissioners appointed to ascertain the most eligible site, near the City of St. John, for a P. L. A. With regard to the temporary L. A. under my charge in this city, and the establishment, since that period, having received liberal support from the Legislature, I feel myself called upon to make this report to Your Ex., for the purpose of showing to your Ex. and the Legislature the immediate advantage to the unfortunate lunatics which even this temporary institution has been, and the indispensable necessity which exists for a P. A. on a scale sufficiently large to accommodate the number of lunatics at present in the province, and on a plan capable of extension so as to meet the increasing wants of the colony.

Before the establishment of this temporary asylum the poor lunatics for their safekeeping were generally confined in gaol by the warrant of two magistrates agreeably to a law of the province, a situation of all others where they would be least likely to recover, and where from neglect and filth they really became objects of disgust rather than of compassion; but since this institution has received support from the Legislature the superintendent has wisely thrown open the asylum for the reception of lunatics from every county in the province, and the gaols are now no longer prisons for lunatics, and a practice so disgraceful to humanity I am happy to say no longer exists. The law itself, however, is still a blot upon the statute book.

A period of 13 months has now elapsed since I made my report to the commissioners, and according to the classification which I then adopted,

the number and description of the cases, and the result of the treatment both of those at that time in the asylum and the patients since admitted will appear by the following table :

Classification of cases when admitted.	How dismissed.				State of the re- maining			Total of the several classifi- cations.
	Cured.	Relieved. By desire.	Unfit.		Died.	Improved.	Continue the same.	
Maniacs	14	1	1	0	1	3	4	24
Maniacs, furious	1	0	0	0	1	0	0	2
Melancholics	0	0	0	0	1	0	0	1
Melancholics, irascible	0	0	0	0	0	0	0	0
Imbecile	0	0	2	0	4	0	9	15
Fatuous	0	0	0	0	0	0	1	1
Total	15	1	3	0	7	3	14	43

There have also been admitted 13 cases of delirium tremens, most of them being outrageous and requiring as much restraint as any maniac; but as persons affected with this disease are not, strictly speaking, insane, nor generally considered proper subjects for a lunatic asylum, I have not included them in the above table. When laboring under that disease, however, they are quite unfit to be at large, both on account of their own and others' safety, and moreover their temporary confinement in an asylum, independently of affording them the best means of cure, is frequently of essential service by keeping out of their reach the stimulus which has been the cause of their malady, and thus, in some measure, breaking a habit which, if continued to be indulged in, must inevitably end in the destruction of the individual.

Two or three have also been sent to the asylum in whom the delirium of fever has been mistaken for insanity, and, although the crowded state of the asylum would have led us to refuse their being admitted, humanity compelled us to allow them to remain.

Of the cases which I have included in the above table, 16 were recent or had been affected within six months previous to admission, and 26 old cases, consisting of such as had been affected for upwards of six months previously, and the result of the cures is as follows :

26 old cases, with 3 cures.

17 recent cases, with 12 cures.

In looking at the above result it must be borne in mind that this asylum has only been thrown open for the admission of patients from all parts of the province for about nine months, and as no asylum has heretofore existed in the province, our number of old cases has been much greater than our number of recent cases, and as a consequence our number of cures in so short a space of time have been few, at least among the former class.

But this is not the worst of it; many of these unfortunate lunatics have been for months and a few of them for years confined in gaol, or in some dark, ill-ventilated and cold room or cell at the residence of their friends, where their safekeeping alone was looked to, and where, from neglect and filth, and want of proper medical treatment, they have been reduced to extreme emaciation; from such mismanagement, diseases which are little under the control of medicine were contracted, and in an awfully emaciated and diseased state have they been admitted into the asylum, some of them with every symptom of confirmed decline, and others with a chronic state of inflammation of the lining of the stomach and alimentary canal, accompanied with an aphthous state of the mouth and tongue, all proceeding from improper confinement in some damp, cold place, and want of attention to the state of the stomach, an irregularity to which maniacs are particularly liable, and which, if not attended to, independently aggravating their malady, is sure to produce disease in some shape or other.

Two of the patients were admitted with fracture of the thigh bone; one of them was a female six months gone with child, who jumped out of a window near 30 feet from the ground; the other a man who had cut his throat from ear to ear, and only been dismissed cured about six months previously from the asylum, and who now had met with his accident by jumping or tumbling over a ship's side, on the stocks. The cures in these two cases were very satisfactory. They were both performed without splints, and the strait waistcoat was required for each during the whole process. The woman was able to walk before she was delivered, and perfectly restored to reason a few weeks afterwards, and does not show the slightest limp, indeed, to use her own words, "you'd never know her leg had been broken." The man, poor fellow, though perfectly cured of his fractured thigh and mania, was not so fortunate. He was seized with fever during his convalescence, from which he had a relapse, accompanied with a good deal of inflammation of the mucous membrane or lining of the bowels, which went on to ulceration, and after lingering for some time with protracted and exhausting diarrhoea, he sank.

There has been a great deal of sickness in the City of Saint John during the whole of the past year. Fever, smallpox, measles and many other contagious diseases have likewise been very prevalent, and, in common with the inhabitants of the city, the inmates of our asylum have suffered. We have lost two or three of our imbecile patients from repeated attacks of fever; frequently before the convalescence was fully established they have been thrown back, notwithstanding the great care which is paid to their diet, cleanliness and general health. One poor fellow, who is now quite strong and well, had no less than three relapses, and I quite despaired of ever getting him upon his legs again. The cold weather, however, did wonders for him, and he convalesced rapidly.

The building has been very much improved, and the new arrangements, both in the yards and interior, have added much to the comfort of the establishment. But we still labor under all the difficulties of want of space

and employment for the patients, without which they are sure to despond, and brood over their hallucinations. Indeed, it may be truly said we possess only half the means of cure.

We have also felt very great inconvenience from the want of proper keepers, and should a provincial asylum be established, it will be indispensably necessary to obtain two or three persons who have been accustomed to the management of the insane in some one of the asylums in England or the United States to take charge of the patients for some time, and for the purpose of instructing others in the very important duties of keepers to the institution.

With regard to the number of lunatics in and belonging to the province, I believe that the estimate which was formed of 1 in every 1000 of the population will be found to be very near the truth. There are a number now confined in asylums in the States who would, no doubt, be immediately removed here by their friends if a proper establishment was provided for their reception.

In conclusion, allow me to add that the very able report of the commissioners which was presented to the Legislature last winter has, I am happy to see, been spoken of in the most unqualified terms of approbation in the twelfth annual report of the managers of the Prison Discipline Society of the U. S. "It is a document," they say, "which reflects much honor upon the commissioners and upon the province"; and with a fervent hope that the Legislature will act upon it and erect a building in every respect according to the plan recommended in that report.

I have the honor to be, etc.,

GEORGE P. PETERS, M. D.

His Ex. Sir John Harvey, etc.

SUPERINTENDENT'S REPORT.

IN CONNECTION WITH THE ACCOUNT OF EXPENSES AND RECORD OF
LUNATICS IN THE TEMPORARY ASYLUM IN THE CITY AND
PARISH OF SAINT JOHN, FOR THE YEAR ENDING 31ST DECEMBER,
1837.

While tendering the account for expenses in support and safekeeping of lunatics in the temporary asylum in the city and parish of St. John for the year ending 31st December, instant, and record of the patients under care in that institution for the same time, the superintendent begs leave to accompany the same with the following few brief remarks:

First, in regard to the account: The very indifferent state of the building used for an asylum and its partially finished condition required many improvements to be made on it last year, and the great increase in number of patients this year, resulting mainly from the asylum being thrown open for the admission of patients from all parts of the province, and the anticipation of more in prospect from the same cause, rendered it absolutely necessary to extend and improve the accommodation conformably with such increase and prospective requirement.

The charges in the account for the different services of the institution may be classed as follows, viz :

	£	s.	d.
Supplies, say, wood, coal, straw, soap, candles, oil, etc.....	96	2	5
Furnishings, stoves and pipes, bedsteads, bedding and straight waistcoats, etc.	97	7	9
Diet	368	14	3
Clothing	79	16	1
Funeral expenses	17	10	0
Improvements, finishing and improving original building, and constructing additional out-buildings	334	15	10
Salaries to under officers, etc.....	72	10	0
Miscellaneous, cartages, etc.....	15	0	11
	<hr/>		
	1081	17	3

On account the expenses of patients, the sum of £25 15s. from the friends of Johnston and Austin is all which has been received, and from the pauper and emigrant character of the lunatics sent to this temporary institution but little, if any, part of the cost of their maintenance and protection can ever be looked for or expected.

The additional account of charges made for the services of the superior officers, doctor, house steward and superintendent, it is trusted, will not be looked upon as otherwise than moderate, particularly when it is considered how much anxious care and solicitude must attend the service and custody of the insane at all times.

Secondly, the record: From this will appear the great number requiring protection and support in the institution last year, amounting in all to 54 patients. Of this number 34 were males, 9 of whom remained over in ward from the year preceding and 20 females, 5 of whom were in ward from the previous year. Of the 34 males, 5 were discharged cured, 1 discharged improved, 1 escaped and 13 died, leaving yet in ward 14; of which number 3 are much improved, 3 improved in some degree and 8 are unimproved. Of the 20 females, 10 were discharged cured, one discharged to friends and 2 died, leaving yet in ward 7; of which number 1 is much improved, 2 improved in some degree and 4 are unimproved.

As the medical attendant, Dr. Peters, has made particular report professionally on the subject of the institution and its inmates to the Executive this year, and furnished the superintendent with copy of such report, which copy accompanies the account, etc., herewith, it is not necessary here to add anything farther on the subject of the character and description of the patients, more than to state that the intemperate use of ardent spirits prevailing so extensively amongst the lower orders of society, and particularly with males, accounts for the great prevalence of insanity and the consequent mortality amongst patients of that sex; and the large number admitted of all sexes is greatly owing to the unusual crowd of strangers in the city and parish this year and the extraordinary extent of sickness generally prevailing amongst them.

The rapidly increasing number of patients in this temporary institution, and yet almost all of them of a pauper and emigrant character only, makes manifest how needful it is to have a provincial establishment of this description in a suitable situation, and on a generous scale, both in regard to accommodation in buildings and extent of grounds around, for the advantage of this unhappy description of patients amongst the most unfortunate of the human family; and it is therefore to be hoped that the present session of the Legislature will not pass by without some solid advances being made towards laying the foundation of an institution for the insane on a plane creditable to the present prosperous and enlightened area (era?) in our provincial history, to be followed with that promptitude in its construction and equipment as shortly to supersede the very imperfect and inefficient temporary asylum in the City of Saint John.

As the establishment of a provincial asylum is an event which cannot but be looked for as almost immediate, it may not be amiss before closing this report to enumerate here the principal furnishings on hand and the value in the temporary asylum capable of being transferred with advantage to another institution of a like description; they are mainly as follows, viz.:

18 iron bedsteads, with bed furniture complete, value, £4 10s. each....	£81
18 cot stretchers, value £3 each.....	54
6 iron plate, and 8 sheet iron dumb stoves, with pipes, etc.....	50
Straight waistcoats, etc.....	25

£210

Respectfully submitted,

GEORGE MATTHEW,
Principal Overseer and Superintendent.

RECORD OF LUNATICS IN THE TEMPORARY LUNATIC ASYLUM IN
THE CITY AND PARISH OF SAINT JOHN FROM 1ST JANUARY
TO 31ST DECEMBER (INCLUSIVE), 1837.

IN WARD FROM LAST YEAR.

1. Nelson Hicks, aged 26; place of nativity, State of New York, United States; disease, idiocy; admitted 14th November, 1835; died 21st June, 1837.
2. Mary Harney, 25, County Galway; idiocy; admitted 14th November, 1835; remaining incurable.
3. Jeremiah O'Neil, 30; County Cork; furiously mad; admitted 17th November, 1836; died 24th August, 1837.
4. John Garden, 26; City of St. John, Carleton; idiocy; 25th November, 1835; remaining incurable.
5. William Oran, 48; City of St. John; furiously mad; 1st December, 1835; discharged in March; readmitted 3d April, 1837; died.
6. John Reed, 48; County Derry; idiocy; 1st December, 1835; remains.
7. Wm. Austen, 50; Cove of Cork; epilepsy; 6th February, 1836; remaining incurable.

8. Wm. Ferguson, 20; London; furiously mad; 26th March, 1836; remaining incurable.
9. Eliz. Warnock, 19; County Donegal; furiously mad; 30th April, 1836; discharged cured 25th April, 1837.
10. Jane Thorpe, 27; St. John; idiocy; 1st July, 1836; remains.
11. Wm. Ritchie, 26; County Donegal; epilepsy; 6th July; remains.
12. James Watson, 40; Glasgow; idiocy; 10th October, 1836; escaped 20th January, 1837, readmitted 26th October; escaped again 15th November, 1837.
13. Mary Crawley, 35; County Cork; ordinary mental derangement; 9th November, 1836; discharged 28th April, 1837; readmitted 18th May; discharged cured 8th July, 1837.
14. Joanna Cuiswick, 25; County Tipperary; furiously mad; 7th December, 1836; discharged cured 5th May, 1837.

ADMITTED IN 1837.

15. James Kayoung, 40; nativity unknown; delirium tremens; 2d January; discharged on 6th; readmitted and died on 15th January.
16. Mary White, 52; St. Andrews, County Charlotte; delirium tremens; 11th January; discharged cured 25th September.
17. Cornelius Murphy, 45; County Cork; delirium tremens; 29th January; discharged cured 28th February.
18. Robert M'Beath, 43; County Donegal; delirium tremens; 8th February; discharged 29th April; readmitted 3d May; discharged cured, 12th June.
19. John Landers, 40; Ireland; ordinary stupid insanity; 7th March; died 5th April.
20. Peter Hislop, 50; Dumfries, Scotland; ordinary insanity; 15th March; remaining much improved.
21. John Johnston, 50; Cumberland, Eng.; ordinary insanity; 5th April; discharged cured 28th June.
22. Thomas York (colored), 21; St. John; idiocy; 7th April; remaining incurable.
23. David Adams, 37; County Antrim; ordinary insanity; 5th May; discharged cured 14th July.
24. Hugh Campbell, 45; County Tyrone; delirium tremens, 22d May; discharged 7th September; readmitted 14th November; remaining improved.
25. Ann Garvin, 31; Connaught; ordinary insanity; 31st May; escaped 23d October; re-admitted 1st December; remaining improved.
26. Daniel McLaughlan, 25; County Derry; ordinary insanity; 8th June; died 2d August.
27. James Hussey, 21; County Kerry; ordinary insanity; 8th July; remaining improved.
28. Ellen Neal, 23; County Kerry; ordinary insanity; 8th July; discharged cured 4th August.
29. Esther Porter, 30; County Donegal; furiously mad; 13th July; died 26th August.

30. Curly Sullivan, 23; County Cork; ordinary insanity; 17th July; died 28th November.
31. John Long, 31; County Cork; furiously mad; 18th July; died 27th July.
32. Maria White (colored), 24; Granville, Nova Scotia; ordinary insanity; 26th July; discharged cured 10th August.
33. Mary Lieghy, 23; County Kerry; delirium tremens; 28th July; discharged cured 18th August.
34. George Mullen, 19; County Tyrone; ordinary insanity; 31st July; discharged improved 4th December.
35. John O'Neil, 27; County Tyrone; delirium tremens; 14th August; died 29th August.
36. Daniel Holmes, 14; County Donegal; idiot; 19th August; remaining unimproved.
37. Peter Hopper, 40; Westmoreland; ordinary insanity; 20th August; remaining unimproved.
38. Mary Cleary, 50; County Cork; delirium tremens; 22d August; died 29th August.
39. Michael Mullen, 11; County Derry; ordinary insanity; 24th August; discharged cured 18th September.
40. Crazy Molly, (about) 50; nativity unknown; idiocy; 12th September; remaining unimproved.
41. Chas. Seymore (colored), 28; Carleton, St. John; ordinary insanity; 14th September; died 14th October.
42. Wm. Thomson; 28; County Donegal; delirium tremens; 20th October; died 23d October.
43. Mary Welch, 32; County Cork; delirium tremens; 22d October; discharged cured 15th November.
44. Timothy Carty, 35; County Cork; ordinary insanity; 24th October; died 4th November.
45. John Carson, 38; County Fermanagh; ordinary insanity; 26th October; remaining much improved.
46. Thos. Osborne, 40; County Waterford; delirium tremens; 4th November; died 6th November.
47. Cicely Duffy, 25; County Donegal; ordinary insanity; 6th November; discharged to husband 11th November.
48. Mary McCarty, 24; County Galway; ordinary insanity; 8th November; remaining unimproved.
49. Mary McCarty, 19; Dublin; furiously mad; 14th November; discharged cured 20th December.
50. Bridget McVey, 19; County Derry; ordinary insanity; 14th November; remaining unimproved.
51. Lucinda Fitzimmons, 21; County Tyrone; delirium tremens; 25th November; discharged cured 1st December.
52. Daniel Gillespie, 38; County Donegal; delirium tremens; 28th November; remaining much improved.

53. Matilda Winters, 35; County Donegal; ordinary insanity; 22d December; remaining much improved.
54. Thomas McGraw, 33; County Fermanagh; delirium tremens; 28th December; remaining unimproved.

GEO. MATTHEW,

Principal Overseer and Superintendent.

CITY AND PARISH OF SAINT JOHN, 30th December, 1837.

GENERAL ACCOUNT FOR EXPENSES LUNATICS IN THE TEMPORARY
ASYLUM IN THE CITY AND PARISH OF SAINT JOHN FROM THE
1ST JANUARY TO 31ST DECEMBER (INCLUSIVE), 1837.

	£	s.	d.
Amount Principal Overseer and Superintendent Matthew's account of expenditure for support and safekeeping of lunatics, including the cost of improvements and additional buildings and furnishings required by the increase in number of patients, from 1st January to 31st December, 1837; and after deducting therefrom the sum of £25 15s. received in part of the expenses of two of the patients entertained therein, as per preceding statement	1056	2	3
Amount agreed to be paid to Dr. G. P. Peters for his professional attendance and medicines for lunatics during the year ending 31st inst.	50	0	0
Amount claimed by William Nisbet, house steward, and considered to be well earned, for services performed by him for lunatics during the past year.....	25	0	0
Amount claimed by Geo. Matthew for overseeing and directing all matters concerning the institution for the year ending at this time	50	0	0
	<hr/>		
	1181	2	3

GEO. MATTHEW.

CITY AND PARISH OF SAINT JOHN, 30th December, 1837.

APPENDIX C.

COPY OF INSCRIPTION ON CORNER-STONE OF PROVINCIAL LUNATIC
ASYLUM, ST. JOHN, N. B.

THIS STONE,

The Corner Stone of a Building to be erected at the Public expense for a
PROVINCIAL LUNATIC ASYLUM,

was, on the twenty-fourth day of June, in the year of our Lord one
thousand eight hundred and forty-seven, in the eleventh year of the

Reign of our Sovereign Lady VICTORIA, by the Grace of

God, of the United Kingdom of Great Britain and

Ireland, QUEEN, and in the seventh year

of the Administration of His

Excellency

SIR WILLIAM MACBEAN GEORGE COLEBROOKE, K. H.,

Lieutenant-Governor and Commander-in-Chief of the Province of New
Brunswick, laid with due solemnity by His Excellency, assisted

by the Right Worshipful the Provincial Grand Master,

the Honorable ALEXANDER KEITH,

and the Albion and other

Masonic Lodges.

COMMISSIONERS

George P. Peters, Esquire, M. D.

William Jack, Esquire

John Ward, Esquire

John R. Partelow, Esquire, M. P. P.

Mayor of the City of Saint John.

Architect—Matthew Stead.

Builder—Otis Small.

THE CARE OF THE INSANE IN NOVA SCOTIA.

NOVA SCOTIA HOSPITAL.

HALIFAX.¹

Nova Scotia was the last of the old British North American provinces to make appropriate provision for its insane. Previous to 1857 pauper lunatics were sent to the "lunatic ward" of the "Provincial and City Poors' Asylum" in Halifax, or cared for at home in a way that can be imagined. Patients whose friends could afford to pay for them found accommodations in the United States or the adjoining province of New Brunswick, whose permanent hospital for the insane antedated that of Nova Scotia by ten years, temporary quarters for them having been provided for over ten years prior to that.

It is but reasonable to suppose that an appreciation of the great need for a suitable hospital had been indicated for some years before any definite action was taken by the Legislature, but the earliest authenticated information obtainable on the subject is that contained in the journal of the House of Assembly for the year 1845. From this we learn that on the 22d of February, in that year, there was presented to the House by A. M. Uniacke a petition from the Mayor, Aldermen, and Common Council of the City of Halifax, praying for aid towards a lunatic asylum or general hospital in the said city, for which purpose large subscriptions had been made.

On the 14th of March, in the same year, the Solicitor-General presented a copy of a dispatch from Sir Wm. Colebrook, Lieutenant-Governor of New Brunswick, to Lord Falkland, then Governor of Nova Scotia. It bore date March 6, and referred to the advisability of the establishment of a joint lunatic asylum for Nova Scotia, New Brunswick and Prince Edward Island.

The report of the committee appointed by the House to examine the merits of the proposed asylum or general hospital, made March 25, stated among other things that Hugh Bell, the Mayor

¹The major portion of this sketch is by Dr. W. H. Hattie, medical superintendent of the Nova Scotia Hospital for Insane.



PORTION OF MAIN BUILDING, NOVA SCOTIA HOSPITAL.

of Halifax, had given £300, and others had contributed £540 toward the establishment of an asylum. They had furthermore found that in the Poors' Asylum some 42 insane persons were being cared for, but, while the neatness and cleanliness of this institution were favorably commented upon, the necessary accommodation for the insane was lacking. In their estimation, they stated that at least 200 other insane people were to be found in the province, and added: "It is a matter of notoriety that the sufferings of this class of our fellow-beings are greatly aggravated by the unwillingness of persons to take charge of them, the gross ignorance that prevails as to their mode of treatment, and by the necessity which frequently arises of confining them in common jails, where they are not infrequently exposed to cruel suffering, and have little chance of being restored to their reason and society."

It is evident from this that the members of the committee regarded the question of providing institutional care for the insane of the province as a highly important one. They had given much thought to it, reviewed a mass of literature placed at their disposal, and inquired into the conditions existing in other countries.

In conclusion the report stated that the committee was favorably impressed with the suggestion of a joint institution for the three maritime provinces, but also recommended "that steps should be taken to procure information upon every particular connected with the building and sustaining of an institution within the province and under its own control, in order that it may be laid before this House at a future session.

To obtain this information the committee suggested that the Lieutenant-Governor be requested to commission one or more persons for the purpose of communicating with the government of New Brunswick upon the proposition submitted, and also to inquire and report upon a suitable site for a building within the province, and to obtain plans and estimates for such a building, the cost of the necessary furniture, and the annual expense likely to be incurred, together with such additional information upon the general management as will assist the Legislature at a future session in deciding upon the propriety of providing the requisite funds for the object, which must be admitted as one of paramount importance.

In accordance with the recommendation contained in this report, Lord Falkland dispatched a commission, composed of Hon. Hugh Bell, Samuel P. Fairbanks, and Dr. Alexander F. Sawers, to visit New Brunswick, inquire there into the feasibility of a joint institution for the three provinces, and then pass on to several states of the American Union, in order to gain information about the construction, equipment, organization and management of institutions for the insane.

The report of the commission, dated February 3, 1846, appeared in the journal of the House of Assembly for that year, addressed to Lord Falkland.

After indicating that inquiry had convinced them of the inadvisability of uniting with the provinces of New Brunswick and Prince Edward Island in the establishment of a common institution, the report gives a detailed account of the visit to a number of American institutions. The members of the commission were greatly impressed with what they saw in the various places to which their mission led them, and gave an enthusiastic account of the excellence of equipment of the different hospitals. They referred to "their spaciousness, their excellent construction, their situation in the midst of agreeable and attractive scenery, to the liberal outlay, in short, upon them, of both mind and money, with a view to making them not only attractive in their exterior, but as comfortable as possible also in their interior." They quoted in the highest approval the words of Dr. Luther Bell, then superintendent of the McLean Hospital, who said, in reference to a recent tour of European asylums:

I found everywhere recognized a principle which was declared to be practical fruits of the experience of institutions brought into existence during the interval following the Parliamentary inquiries 30 years since. The principle is this: that there is no such thing as just and proper curative or ameliorating treatment of the insane in cheaply constructed or cheaply managed institutions; that the measure of expense of common paupers should never be regarded in providing for the insane; that a better class of almshouses may be carried on for receiving lunatics, and dignified with the name of asylums or hospitals, with some degree of apparent success, but to do the greatest amount of good to the insane, the mind of the tax-paying community must be trained to understand and admit the necessity of expensive arrangements, and that if it be worth while to have any institutions, it is worth while to have such as will accomplish all of cure or relief which is practicable.

The report further included an exhaustive summary of the conclusions reached by the commission with reference to a provincial institution, under the headings of "Architectural Arrangements and Organization."

The report throughout indicates an excellent grasp of the problems by those composing the commission. A large portion of the report is quite applicable now, after the lapse of well nigh 70 years. One statement made, however, reads strangely in the light of more modern experience, to wit: "We might also add, what experience has verified, that wherever an asylum is established, there the numbers of insane in proportion to the population begin to diminish. This is a natural consequence of the immediate attention they receive, and we have thus a double saving, both of suffering and expense."

On the report being submitted to the House of Assembly, it was referred to a committee composed of Thos. A. S. De Wolf, John Campbell, A. M. Uniacke, James McNab and Henry Martell. This committee, reporting on the 2d of March, 1846, highly complimented the commissioners on the thoroughness of their work, and expressed hearty sympathy with the movement looking toward the erection of an asylum. They urged immediate commencement of the work, saying: "Your committee are deeply impressed, as well by the facts stated in the commissioners' report as from their personal knowledge of the number and unhappy condition of that class of persons who are to benefit by an institution of this character, and that the time has now arrived when the Legislature and the wealthy inhabitants of this province are imperatively called upon to make a commencement in the benevolent work of providing an asylum."

The commissioners gave it as their opinion that £10,000 judiciously applied would purchase the necessary grounds and erect and furnish such buildings as would meet the requirements of the province for many years to come. They recommended that £2000 annually for five years should be granted for this purpose, under such guards and regulations for its expenditure as the House deem prudent and necessary, and especially that a grant of £2000 for the current year, which, with the private subscriptions (already amounting to nearly £1000), would procure the site and the requisite materials preparatory to building, thus enabling those

who may be appointed to conduct this expenditure to make a suitable beginning in a work, the satisfactory completion of which can only be accomplished with time.

On the 14th of March following Mr. De Wolf moved that the report of his committee be referred to the committee of supply. To this there was no opposition, but the Solicitor-General, Mr. Howe, and others, "objected to commencing a work which would avowedly cost £10,000, and might cost double that sum, at the end of a session, when the treasury was empty, when no site had been selected, and there was no time to arrange details which ought to be adjusted before a work of such magnitude was commenced. The Solicitor-General accordingly moved in amendment that consideration of the subject be deferred until the next session. The amendment carried by a vote of 20 to 12."¹

Two days later, on motion of A. M. Uniacke, it was resolved "that His Excellency the Lieutenant-Governor be respectfully requested to make such inquiries as may be necessary for ascertaining the most suitable situation in this province for a lunatic asylum and for ascertaining the probable cost of founding and subsequently sustaining such an establishment, and report the information to this House at its next session, together with suitable plans and specifications."

The committee to which this task was allotted was composed of Hugh Bell, Dr. A. F. Sawers, John E. Fairbanks, A. M. Uniacke, and Charles Twining. In their report, dated January 1, 1847, they mention three available sites: one of 900 acres at Birch Cove, valued at £1200; one of 470 acres at Prince's Lodge, valued at £1500; and one of 100 acres at Dartmouth, valued at £500. The site at Birch Cove was favored by all the members of the committee except Mr. Fairbanks, who preferred the Dartmouth site, and they estimated that a building to accommodate 120 patients would cost £9600, exclusive of land, stock, furniture, etc. By way of comparison they stated that the estimate for a new asylum in New Brunswick for 150 patients was £15,000, while for one in Toronto for 300 patients it was £50,000. The total cost of sustenance of 120 patients it was anticipated would be about £4320 annually, of which probably £2240 would have to be borne by the

¹ "The Nova Scotian," March 23, 1846.

provincial treasury, and it was recommended that accommodation for this number should be at once provided, the building being so designed as to permit of enlargement as might be required. It was further recommended "that the whole structure be substantial and of the best materials; and that all the architectural arrangements be designed and finished with undeviating reference to the health, comfort and cleanliness of the patients, by the introduction of hot and cold baths, of the most approved means of heating and ventilating the apartments and corridors, and of an efficient system of draining away impurities and bad odors from all parts of the building."

In opening the session of 1847 Sir John Harvey, then Lieutenant-Governor, included in his speech this pointed reference to the urgent need for a hospital:

There is another matter which has constituted to me a subject of the most painful interest in all the colonies with which I have hitherto been connected, and which presents itself to me in no less distressing aspect in this. I allude to the absence of suitable arrangements for the reception and treatment, with a view to relief or cure, of that class of unhappy beings which I grieve to believe is rapidly increasing in these colonies, owing to the causes to which I have adverted, viz., the want of those means of effectual application to the disease in its incipient stages which I regard as the solemn duty of the legislature of every colony to provide for its *pauper lunatics*. I accordingly earnestly recommend this subject to your serious and compassionate consideration, in connection with a very able and satisfactory report which will be laid before you from the commissioners appointed by my predecessor in the administration, to select the best site for the proposed building.

There was still delay, however, and three years later Sir John again, in a speech at the beginning of a session of the Legislature, betrayed considerable impatience at this lack of activity, saying "that absence of any provision for lunatics has been painfully forced upon my attention during the recess, and I refer to the subject for the purpose of submitting whether some arrangement might not be made either for the erection and endowment of an asylum for the insane, or for the maintenance, in suitable institutions founded in the neighboring provinces, of those unfortunates who, without the light of reason, are unable to support themselves."

A few days later (January 21, 1850) there was presented to the Legislature a memorial from Miss Dorothea L. Dix, praying for immediate action.¹

This memorial of Miss Dix is of peculiar interest to Nova Scotians, inasmuch as their province, so far as can be learned, seems to have been the only one of the British North American colonies toward which she devoted *special* attention; the reason therefor probably being that it was the most backward in providing proper provision for the insane. The province bears the further honor of having had the site for its hospital selected by this world-renowned and universally esteemed philanthropist, who also took an active part in determining various questions connected with the erection of the building, and is said on several occasions to have come into sharp conflict with members of the government and others, usually carrying her point. As an added mark of her sympathy toward the movement Miss Dix gave a collection of pictures to ornament the hospital walls.

The appeal of Miss Dix, set forth in graceful but vigorous English, is well worthy of perusal. It is an able statement of a strong case, her arguments, proving the crying necessity for the immediate erection of an insane hospital, being supported by a formidable array of facts and figures gathered from various sources and countries, as well as a plain recital of the then deplorable condition of the insane in Nova Scotia.

It is not surprising that the select committee to whom the memorial was referred gave expression to their great admiration of the noble lady, "who, endowed with every quality calculated to advance society, dedicates her time and thoughts solely to the cause of those who cannot appreciate her efforts."

This committee, composed of James McLeod, Stephen Fulton, John Ryden, Joseph Howe and Samuel Creelman, recommended that "a bill be passed during the present session containing provision for the appointment of commissioners to select a site and erect the requisite buildings, the whole expense not to exceed £15,000, to be borrowed as required and repaid by installments of £3000 per annum."

Notwithstanding such urgent appeals for early action, and notwithstanding the fact that both private donations and legislative

¹ Appendix A, Vol. I, p. 482.

grants were made for the purpose, some years still elapsed before a beginning was made, and it was not until 1856 that construction was actually commenced. Among the most important of the private donations was the sum of £1670 left by John Brown, a wealthy merchant of Halifax, the interest of which was to be appropriated for the support of the indigent insane, and £300, a year's salary of the then mayor of that city, Hugh Bell. The condition attached to Mr. Bell's gift was that the interest upon it and an additional £200, contributed by an anonymous friend of his, should for the first four years be devoted to the purchase of books for a hospital library.

The date selected for the laying of the corner-stone was the natal day of Halifax, "the ever-memorable anniversary of the landing of Cornwallis and his adventurous compatriots on the shores of 'old Chebucto.'" As, however, the 8th of June fell on Sunday in the year 1856, the holiday was celebrated on the 9th. A few days before the troopship *Himalaya* had arrived, bringing 1400 officers and men of the 62d and 63d regiments from the battle-fields of the Crimea, and the holiday programme included a civil welcome to the veterans. We often flatter ourselves that ours are strenuous times, but the record of that holiday is one which we cannot well expect to surpass. At sunrise the volunteer artillery announced the fact that Halifax had reached its 108th birthday by a salute of 108 guns, to a vigorous accompaniment of bell-ringing, whistle-blowing and sundry other methods of manifesting pleasure. A loyal address to the throne, an appropriate formal welcome to the recently arrived troops, and a grand review of the whole garrison were the principal, though by no means the sole, events which contributed to the joy of that eventful day. In the afternoon attention was directed toward the new hospital, and across the harbor the citizens flocked—by ferry, by tugs, by sail-boats and by row-boats—to witness the rites associated with the laying of the corner-stone. The arrangements for the ceremony were elaborate. The volunteer artillery, with field guns, were early despatched to the scene. A guard of honor, composed of the flank companies, band and colors of the 63d Regiment, followed in proper order. Then the Masonic bodies, with the band of the 76th Regiment, took up their respective positions. At the appointed hour Major-General Sir John Gaspard Le Marchant,

the Lieutenant-Governor, arrived with his suite, and was received with a salute of 13 guns. The stone was laid, in accordance with Masonic ritual, by Alexander Keith, Grand Master, assisted by the Lieutenant-Governor. When it had been pronounced well and truly laid, a salute of 21 guns was fired by the artillery. Then followed felicitations, and, as the Governor departed, another salute of 13 guns announced the completion of the ceremonies. Yet, after all this, an evening of fetes and festivities was required to round out a holiday in the year 1856.

A humorous description of the event, excerpted from "Acadia, or a Month with the Bluenoses," by Frederick S. Cozzens, who had come to Nova Scotia in search of health, is of interest in this connection. (See Appendix A.)

Despite the care thus taken that the corner-stone should be "well and truly laid," it is recorded in Mrs. Lawson's "History of Dartmouth, Preston and Lawrencetown" that during the night following the ceremony some miscreants capsized the newly laid stone and appropriated the various articles which had been deposited therein.

The site selected and christened by Mrs. Hugh Bell, with the sanction of Miss Dix, "Mount Hope," comprised 85 acres of land, only a small portion of which, however, was arable, picturesquely situated on the Dartmouth side of the harbor of Halifax, at a distance of about two miles from the city. While excellent as a site, the shape of the property was ill-adapted for an insane hospital, being more than a mile in length, but only 600 feet in width, so that the south wing of the building came within a few feet of the boundary line, and the north wing, when completed, left only room for a roadway on the hospital property.

The institution was built on plans suggested by Dr. C. H. Nichols, superintendent of the Government Hospital for the Insane at Washington, D. C., of which institution it was a modified copy. The structure was of brick, made for the most part on the premises, and was designed with wings two and three stories in height, the center building being four stories in height.

From the date of the laying of the corner-stone steady progress was made, and a portion of the edifice was completed and furnished by the autumn of 1857. The administration department being still only on paper, a portion of the finished structure was partitioned

off for a commissioner's office, kitchen, chapel, and quarters for the superintendent, steward and matron.

The executive officers took possession of their temporary quarters on the 1st day of December, 1857, the first medical superintendent being Dr. J. R. De Wolf, who had been appointed such in May preceding. On the 26th of the same month, the first patient, a man,¹ was admitted, and within the next four weeks 18 others were received, 13 of the number being transfers from the Poors' Asylum of Halifax.² This institution, now the Halifax City Asylum and Poorhouse, was supported jointly by the province and the city. It received paupers from all parts of the province, and had two wards for lunatics.

By the terms of an act entitled "An Act for the Management of the Hospital for the Insane," passed May 7, 1858, the title of the establishment was declared to be "The Provincial Hospital for the Insane"³ and its object defined as "the most humane and enlightened curative treatment of the insane of this province." The Governor, the Chief Justice, the Provincial Secretary, the President of the Legislative Council, the Speaker of the House of Assembly and the heads or authorized representatives of all the Christian churches in the province were made ex-officio visitors of the hospital.

The management of the hospital was at first vested in a body of commissioners, nine in number, appointed by the Governor in Council, who were created a body corporate under the name of "The Commissioners of the Provincial Hospital for the Insane." They served without compensation, the original members being Dr. D. McNeil Parker, chairman; Geo. H. Starr, Daniel Creamer, Samuel A. White, David Faulkner, John A. Bell, John Dorill,

¹In his report for the year 1907 Dr. Hattie, medical superintendent, says: "This man is at the present writing a patient with us, although he made a good recovery from the attack for which he was first admitted and was for many years free from mental disorder."

²Report of the commissioners and medical superintendent of the Provincial Hospital for the Insane, Halifax, N. S., for the year 1858, p. 24.

³This, in 1872, was changed to the Nova Scotia Hospital for the Insane, and, in 1900, with the publication of the Revised Statutes of that year, again amended to become what it now is, the Nova Scotia Hospital.

Dominick Farrell and John W. Ritchie.¹ They were to hold quarterly meetings (more frequently if necessary), and one or more of their number were to visit the hospital every Wednesday.

The medical superintendent, appointed by the Governor in Council, was the chief executive officer of the hospital. He was expected to be a well-educated physician, and, in addition to ministering to the health and well-being of the patients, was required to direct the various departments of the hospital, "subject to the judgment and control of the commissioners."

The act of 1858 did not specify what rates were to be charged the various municipalities for the care of their insane, but did specify that the admissions from each county should be in the ratio of its insane population, and guarded against overcharges by stating: "Indigent persons and paupers shall be charged for medical attendance, board and nursing, while residents of the hospital, *no more than the actual cost.*" For patients not chargeable to townships, districts or counties the rate was to be arranged by the commissioners, "having relation to the accommodation desired and afforded." One of the first duties of the commissioners was, therefore, to fix the rates at which indigent persons should be admitted. This they did, making the rate for males £32 10s.; for females £26 per annum. These amounts were estimated to be considerably under the cost of actual maintenance.²

The rate for private-paying patients was fixed at £50 per annum, those requiring extra accommodations and attendance to be charged accordingly.

Insane transient paupers were authorized to be received at provincial expense, but only after the commissioner had been satisfied by affidavit and documentary testimony that such persons were not properly chargeable to any township or county of the province.

The commissioners seemingly anticipated criticism of their scale of charges, as appears by the following extract from their report, dated January 24, 1859:

¹ Report of the commissioners and medical superintendent of the Provincial Hospital for the Insane at Dartmouth, Halifax, N. S., for the year 1858, p. 13.

² Report of the commissioners and medical superintendent of the Provincial Hospital for the Insane at Dartmouth, Halifax, N. S., for the year 1858, p. 8.

Contrasted with the usual charges for board and lodging in the capital and other parts of the province, the commissioners find that laboring and mechanical classes pay for these two items about from £30 to £40 per annum; while young men and lads engaged in offices and stores are charged not less, and often more, than £1 per week; rather more than the above hospital rate for private-paying patients. Now it is to be borne in mind that all the patients of the institution will not only be provided with board and lodging of a superior description, but with medical and other attendance, nursing, washing, mending, and the use of a good library, besides many other comforts, some of which we may designate as luxuries, that even the wealthy have not always at their command.

On December 31, 1859, the close of the first year of the hospital's existence, there were in residence 55 patients—28 males and 27 females.

The portion of the building originally constructed provided for only 90 patients, whereas the number of lunatics in the province, including those still remaining in the Poors' Asylum, was estimated at not less than 350. In consequence the commissioners, even in their first report, urged upon the Lieutenant-Governor the pressing need for increased accommodation. They further stated that there were several insane criminals in the provincial penitentiary and different jails who should be removed to the hospital at Dartmouth, but for whose safekeeping they could not become responsible, because the part of the hospital intended by the original design for insane criminals, violent and noisy patients had not yet been commenced.¹

Work was accordingly begun on the southern division of the building. This, comprising two wards, was ready for occupancy about the end of May, 1861. In 1865, the cry still being "no room," the Legislature passed a grant of \$80,000, and the construction of the center building and a part of the north wing was immediately entered upon, the original design being, in the main, adhered to. These additions were completed in the latter part of 1867 and opened for the reception of patients in 1868. The transfer of the officers and officers' quarters to the new administration building admitted of the rooms previously occupied for these purposes being utilized for patients as primarily intended. This enabled a much better classification, the new or north wing being

¹ Report of the commissioners and medical superintendent of the Provincial Hospital for the Insane at Dartmouth, Halifax, N. S., for 1858, p. 11.

reserved for women, the old or south wing for men. The new wards, three in number, were named after the most prominent benefactors of the institution, the Bell, Brown and Binney wards.¹

The completion of the hospital, as originally designed, was realized in 1874, its nominal capacity being 330. It consisted of eight wards for male patients and nine wards for female patients. According to the custom of the time, the nurses and attendants had rooms on their wards; each ward had a separate dining room, and the superintendent, with his family, occupied apartments in the building. In 1902 a congregate dining room for the quieter patients was provided, thus permitting of several of the ward dining rooms being converted into sleeping apartments for inmates. The upper story of this congregate dining room was fitted up as a comfortable and commodious amusement hall. In 1907 a store building was erected, the upper story of which contained quarters for male attendants. In this year, too, a separate residence was built for the medical superintendent, thus allowing of a redistribution of quarters in the main building and new quarters for the nurses. By these various changes the capacity of the hospital was increased to 440. Another important occurrence in the year 1907 was the purchase for the hospital of a plot of land immediately adjoining the hospital property to the south, consisting of about 160 acres.

A building for acute cases, now approaching completion, contains separate wards, especially equipped for tubercular cases, as also semi-detached sections for other infectious cases. In planning this structure general hospital ideas were adhered to as closely as possible. In the central section, on the ground floor, are the offices, visitors' rooms, laboratory, treatment room and day rooms for patients, while in the basement provision is made for a hydrotherapeutic installation. An operating room, with accessory rooms, is situated on the first floor, while the upper story contains quarters for the staff. From either side of the central section wings project which are but one story in height. In these are situated the wards, with the necessary diet kitchens, linen rooms and lavatories. A small ward, of ten beds on either side, will be set apart for tubercular patients, the verandas of

¹ Provincial Hospital for the Insane, Halifax, N. S., tenth annual report of the medical superintendent, being for the year 1867, p. 7.

which are very broad and roofed with glass. A small, self-contained section is provided on each side of the building for the reception of any cases of infectious disease (other than tuberculosis) which may develop.

Dissensions had arisen among the members of the original Board of Commissioners as early as 1859, while some adverse criticism of their methods of finance had been made. These troubles in 1860 increased to such a degree as to seriously interfere with the discipline and good government of the institution. The result was that they were referred to the Lieutenant-Governor in Council, whereupon, the commissioners having resigned, after a little more than two years' service, the control of the hospital was vested in a Board of Works, composed of Hugh Munroe, Andrew McKinlay and John Gibson, with J. H. Anderson, receiver-general, as treasurer.¹

In this same year (1860) the hospital sustained a severe loss in the death of its promoter and staunch advocate, Hugh Bell, whose philanthropy and liberality had been of such essential service to the insane.

In 1867 a new arrangement came into effect. In this year Robert Robertson became Commissioner of Mines and Works and, associated with a board of three commissioners, Charles Twining, George G. Dunston and John Starr, was given the general supervision of the hospital, in place of the former Board of Works. At the same time the superintendent, who had hitherto done the work alone, was given a much-needed assistant, in the person of Dr. Robert W. McKeagney.

The year 1878 saw two important changes in the management of the hospital. Dr. De Wolf, medical superintendent, after 20 years' service, retired to give place to Dr. A. P. Reid, and the Commissioners of Public Charities were entrusted with the administration of the institution. Under the new arrangement Samuel Creelman was chairman from 1878 to 1882, Albert Gayton from that year until 1884, and Charles E. Church subsequently until still another method of management became operative in 1886.

¹ Provincial Hospital for the Insane, Halifax, N. S., third report of the medical superintendent, being for the year 1860, p. 11.

In this year the government abolished the Board of Public Charities and made the Commissioner of Public Works and Mines, then Charles E. Church, the sole authority. This arrangement, which is still in vogue, was supplemented by the appointment of an Inspector of Humane Institutions, Dr. A. C. Page, making the system practically identical with that of Ontario, the working of which had been very successful.

Under the regime of Mr. Church, who remained in office until 1901, when he was compelled to retire because of ill-health, several important improvements were effected, to wit, the erection of a dining room building, the introduction of electric lighting and the replumbing of the entire hospital. His successors in office, Arthur Drysdale (now Justice Drysdale), Wm. T. Pipes and Christopher P. Chisholm, were no less zealous in their efforts at advancement. Among the advances made under their successive administrations were the erection of a store, building and a residence for the medical superintendent, the installation of a sand-bed filter and a new heating and ventilating system, and the erection of a new power plant. The present commissioner, Ernest H. Armstrong, who succeeded to office in 1911, has been most attentive to the needs of the hospital and most sympathetic with its aims. Under his direction has been erected the new building for acute cases already referred to and now nearly completed.

In 1892 Dr. Reid resigned the position of medical superintendent and was succeeded by Dr. George L. Sinclair, whose 15 years' service as assistant superintendent admirably qualified him for the position. Dr. Sinclair having retired in 1898 to accept the position of Inspector of Humane Institutions, was succeeded by Dr. W. H. Hattie, the present able superintendent.

Broadly speaking, the Nova Scotia Hospital for the Insane is kept well up to the times. It is conducted entirely on the non-restraint principle, and has a training school for nurses attached. This was organized by Dr. Sinclair in 1893, and has done admirable work in the preparation of nurses to more intelligently discharge their important duties.

The institution still remains the only one of the kind in the province, but, since 1886, a few counties have erected county asylums, and a number combined county asylums and poorhouses. They are built and maintained by the various municipalities. To

these can be transferred the harmless insane from the provincial hospital, and to them can be sent direct idiots, non-violent epileptics and cases of chronic insanity refused admission upon statutory grounds. Each of the establishments is governed by a committee. The immediate management is entrusted to a keeper and a matron, and there is a visiting medical officer attached. They are also regularly inspected at non-stated intervals by the Inspector of Humane Institutions, who reports to the government upon the condition of each and is empowered to order the transfer of any patient from them to the provincial hospital.

As chronic cases who are quiet and industrious are usually transferred to the county asylums, it naturally follows that the proportion of patients employed on the farm and in the shops of the hospital proper is relatively small. Nevertheless, there are a goodly number kept busy there, and considerable of the construction work accomplished of late years has been materially forwarded by their aid.

These county structures have been erected in pursuance of a plan outlined by Dr. Reid and named by him "The County Cottage Asylum System,"¹ a plan necessitated by the pressing need of additional room for the insane, and the financial inability of the province to undertake the erection of another hospital. It is only fair to Dr. Reid, however, to state that this was the last of four alternative suggestions made by him, and that it was the one he considered the least desirable, although the cheapest way to provide the required room. The other three plans in order of merit were: first, the erection of an additional hospital in another section of the province; second, the enlargement of the existing hospital by the construction of a number of cottages; third, the creation of a provincial institution for the chronic insane. Some of the essentials to Dr. Reid's scheme as originally outlined were the following, which, unfortunately, have not always been adhered to: first, that no patient should be permitted to remain in one of the county asylums who had not been sent from the provincial hospital, and who was by the authorities there considered fit to be thus cared for. Every case temporarily admitted to such asylums to be allowed to remain only long enough to permit of transfer

¹ Twenty-fifth annual report of the Nova Scotia Hospital for Insane for the year 1882, p. 14.

to the provincial institution, thus guarding against the possibility of recent cases being detained there to their detriment. Second, the insane and paupers, though under the same management, to be provided for in separate buildings, at such a distance apart as to give privacy to the insane, the two classes not being allowed to mix when outside. Third, a farm to be connected with each asylum, consisting of not less than an acre of good land for each patient.

The water supply for the institution is obtained from a lake owned by it, situated about a mile and a quarter distant, while fire protection is provided through the agency of a power house located on the shore of the harbor. Here are installed two fire pumps, each with a capacity of 750 gallons per minute, which take water directly from the harbor.

The maintenance of the hospital is undertaken by the government, the lands and buildings being provided by the province. The municipalities are charged at the rate of \$3.50 per capita per week for the patients they send in. The medical officers and accountant of the hospital are appointed by the Governor in Council, the other officers by the Commissioner of Public Works. Nurses, attendants and servants are appointed by the medical superintendent.

At the opening of the hospital the commitment of a patient to it required that a statement (history) of the case was to be forwarded to the superintendent, who advised the commissioner whether the patient should be received or not. If the decision were favorable to admission, two medical certificates, a warrant (signed by two justices of the peace or a stipendiary magistrate) and an order for reception (issued by the commissioner) were demanded before the case could be accepted. In 1909 the warrant was abolished, and at the present time two medical certificates, with a history of the case, constitute the authority for anyone to convey a patient to the hospital and for the medical superintendent to detain him therein. In 1911 provision was made for voluntary admission to the hospital under similar conditions to those which obtain in the State of New York and elsewhere.

By the census of 1911 the total number of mental defectives in Nova Scotia was 1655, of whom 1176 were under institutional care, 441 of these being in the provincial hospital. On September

30, 1913, the said hospital population had increased to 454, viz., 223 men and 231 women.

A perusal of the old reports of the hospital indicates continuous progress. Often enough great difficulties had to be contended with, and, in the earlier days especially, vexatious and troublesome complications were frequent. The transportation facilities of 50 years ago were, of course, poor as compared with those of the present time, and often made it difficult to get patients to and from the hospital, it being said that on one occasion it took a patient from Victoria County 39 days to reach the institution.

APPENDIX B.¹

It was my fate to see next day a great celebration. It was the celebration of peace between England and Russia. Peace having been proclaimed, all Halifax was in arms! Loyalty threw out her bunting to the breeze and fired her crackers. The civic authorities presented an address to the royal representatives of Her Majesty, requesting His Excellency to transmit the same to the foot of the throne. Militiamen shot off municipal cannon; bells echoed from the belfries; the shipping fluttered with signals; the Citadel Hill telegraph, in a multitude of flags, announced that ships, brigs, schooners and steamers, in vast quantities, were below. Nor was the peace alone the great feature of the holiday. The 8th of June, the natal day of Halifax, was to be celebrated also. For Halifax was founded, so says the *Chronicle*, on the 8th of June, 1749, by the Hon. Edward Cornwallis (not our Cornwallis), and the 'Alligonians in consequence make a specialty of that fact once a year. And to add to the attraction, the Board of Works had decided to lay the corner-stone of a lunatic asylum in the afternoon; so there was no end to the festivities. And to crown all, an immense fog settled upon the city. . . .

As I said before, to make the festivities complete, in the afternoon there was a procession to lay the corner-stone of a lunatic asylum. But Oh! how the jolly old rain poured down upon the luckless pilgrimage! There were the virgins of Masonic Lodge No. 3; the Army Masons in scarlet; the African Masons in ivory and black; the Scotch piper Mason, with his legs in enormous plaid trousers, defiant of Shakespeare's theory about the sensitiveness of some men when the bagpipe sings i' the nose; the clerical Mason in shovel hat; the municipal artillery; the Sons of Temperance, and the band. Away they marched, with drum and banner, key and compass, Bible and sword, to Dartmouth, in great feather, for the eyes of Halifax were upon them.

¹From "Arcadia, or a Month with the Bluenoses," by Frederick S. Cozens.

CARE OF INSANE IN ONTARIO.

The first movement toward providing for the insane in the then Province of Upper Canada was made in 1830, when the House of Assembly passed an act authorizing the General Quarter Sessions to make provision for the relief of destitute lunatics in the Home District.¹ This act, which in 1833 was extended to all the districts of the province,² did not contemplate the erection of an asylum. It proposed merely to legalize the payment for the maintenance of lunatics in county jails, which until then, and for nearly eleven years thereafter, formed the only refuge, other than their homes, for these poor creatures.

The evil of the prevailing state of affairs was clearly recognized. Between 1830 and 1839 numerous attempts were made in the Legislature toward the institution of an asylum, all of which, however, proved abortive. In 1831 the York grand jury reported in favor of building an asylum, wherein they considered the insane would receive greater care and comfort than was possible in the common jails. During the same year notice was given in the House of a bill to establish an asylum in connection with York Hospital, but it was not presented. In the session of 1832-33 a motion was made in the Legislature to grant £100 to be expended on plans and estimates for an asylum, but it failed to pass. Next session, 1833-34, a motion was made to grant £6000 for the erection of an asylum, but this also was voted down. In 1835 there was another notice of motion to establish an asylum, but it was not proceeded with. In 1836 a motion to grant £10,000 to defray the expense of building an asylum was made, but did not carry. At the same session a notice of motion for the erection of an asylum by a tax on banks was recorded, but never presented. Again, in the session of 1836-37 notice of motion was given to procure plans and estimates for a suitable building for the insane, but the motion was never made. Finally, on March 15, 1839, a resolution authorizing a grant of £3000 toward the erection of a

¹ Statutes of Upper Canada, 11 George IV., Cap. 20, A. D. 1830.

² Statutes of Upper Canada, 3 William IV., Cap. 45, A. D. 1833.

lunatic asylum was put and carried by a large majority. An act framed in accordance with this resolution was passed April 24, and on May 11 received the assent of His Excellency Sir George Arthur, then Lieutenant-Governor of the province.

In the preamble thereto the reasons for this act are thus set forth:

WHEREAS, The establishment of an asylum in this province for the reception of insane persons has become necessary, and it is therefore expedient to authorize His Excellency the Lieutenant-Governor to appoint commissioners for superintending the erection of a suitable building to be appropriated for the purpose aforesaid, and to provide for the appointment of officers for the government thereof, and to frame regulations for the management of the said asylum, and to authorize the Court of Quarter Sessions in each district in the province to levy an additional assessment of one-eighth of a penny in the pound, to be annually appropriated to the erection of the said asylum, and in the purchasing of land sufficient for a site, and maintaining and supporting the same; be it therefore enacted by the Queen's Most Excellent Majesty, by and with the advice and consent of the Legislative Council and Assembly of the Province of Upper Canada, constituted and assembled by virtue of and under the authority of an act passed in the Parliament of Great Britain entitled "An Act to Repeal Certain Parts of an Act Passed in the Fourteenth Year of His Majesty's Reign entitled 'An Act for Making More Effectual Provision for the Government of the Province of Quebec, in North America, and to Make Further Provision for the Government of the Said Province,' and by the authority of the same, That an asylum for the reception of insane and lunatic persons shall be erected on such plot of ground as shall be appropriated by the Lieutenant-Governor, or purchased by commissioners appointed under the authority of this act for the purpose."¹

Among the provisions of the act were the following:

Of the commissioners appointed to superintend the erection of the asylum, one was to be an experienced medical practitioner.

As soon as the building was ready for the reception of patients His Excellency was to appoint a board of directors, to consist of not less than 12 persons, residents within the province, to control its affairs.

The Board of Directors was empowered to frame rules and regulations for the management of the institution, and to appoint a resident medical superintendent, whose salary was not to exceed £300 per annum. They were also given the appointment of all other officers and servants with power to remove them at pleasure,

¹ Statutes of Upper Canada, 2 Vict., Cap. 10, A. D. 1839.

and to fix the amount of their salaries, subject to the confirmation or disallowance of the Lieutenant-Governor.

Three members were constituted a quorum of the Board of Directors, which was to meet at least once in each month at the asylum. A plurality of votes was to be binding and conclusive upon any matter before it, the chairman, in case of a tie, being given the casting vote.

A yearly report was to be made by the board to the Lieutenant-Governor for the information of the Legislature.

Subjects of Her Majesty, residents of the province, were to be received into the establishment after proof of these facts to the satisfaction of the board, or any one member thereof, in case the board was not sitting, and the production of a certificate signed by at least three resident physicians practising in the province that such person had been examined by them collectively and found to be insane.

In case the superintendent or any official of the asylum admitted a patient without receiving such certificate, together with an order from the board or one of its members, he was liable to a penalty of £100, recoverable by any one in any of Her Majesty's courts of record in the province. One moiety of such penalty went to the use of the institution and the other to the party entering the suit.

The board was authorized to fix the rates at which patients should be received, and in the case of destitute persons to admit them free of charge upon proof that they were without means.

Vacancies among the directors were to be filled by the Lieutenant-Governor.

On the 20th of September following the passage of this act His Excellency was pleased to appoint the Hon. John Macaulay, Inspector-General, Christopher Widmer, M. D., and Alexander Wood, Esq., to be commissioners for the purpose of carrying it into effect.¹ The next year we find his appointees addressing the following communication to the College of Physicians and Surgeons of Upper Canada :

TORONTO, April 16, 1840.

SIR: The commissioners for erecting a lunatic asylum in this province have resolved to ask the opinion of the College of Physicians and

¹ Upper Canada Gazette, October 3, 1839.

Surgeons regarding the eligibility of a certain site north of the city, whereon to erect the building, as to salubrity.

The commissioners respectfully request the attention of the college to this matter at its earliest convenience, and will point out the spot alluded to whenever the college shall be pleased to give them notice of its intention to view it.¹

We have the honor to be, Sir,

Your obedient servants,

(Signed) C. WIDMER,
ALEXANDER WOOD,
Commissioners.

To Lucius O'Brien, M. D., Secretary,

College of Physicians and Surgeons of Upper Canada.

The college appointed Drs. John King, Wm. C. Gwynne and George Herrick a committee to inquire into the subject matter of this communication. At its next meeting, held April 25, these gentlemen reported having visited three sites lying contiguous to each other north of the city, the properties of John Scadding, Esq., James Small, Esq., and Hon. Wm. Allan. Either of these localities they considered would be an eligible site for the intended asylum, but gave the preference to the James Small property on account of its superior elevation.

Beyond this consultation with the College of Physicians and Surgeons, there does not appear to have been anything done by the original commissioners, who on November 3, 1840, were replaced by a board consisting of the Hon. Robert S. Jamieson, C. Widmer, M. D., Alexander Wood, Esq., James Sampson, Esq., and John Ewart, Esq.² This absence of action may have been due to the fact that it was still a much-mooted question whether the proposed asylum should be located at Kingston or Toronto, the Lieutenant-Governor strongly favoring the former city. In consequence of this doubt the College of Physicians and Surgeons adopted, June 10, 1840, the following memorial:

To His Excellency Major-General Sir George Arthur, K. C. H., Lieutenant-Governor, etc.

We, the president, vice-president and fellows of the College of Physicians and Surgeons of Upper Canada, respectfully beg leave to address Your

¹ "The Medical Profession in Upper Canada," 1783 to 1850, W. Canniff, M. D., p. 142.

² Upper Canada Gazette, November 27, 1840.

Excellency on a subject of vital importance to the college and the profession generally throughout the province.

Having understood that Your Excellency has recently come to the determination that the asylum to be erected in this province for the reception of insane and lunatic persons, in pursuance of the provisions of the statute of the 2d Victoria, Chap. XI, shall be located at Kingston, we would earnestly but most respectfully offer to Your Excellency many cogent reasons upon which we hope Your Excellency may be rendered (induced?) to alter your determination thereon.

It certainly could not have escaped Your Excellency's penetration that such an establishment as a lunatic asylum should be so situated that it would afford to the friends of the pitiable objects for whose accommodation, protection and cure it is founded the assurance of their receiving the most efficient and popular professional aid that could be obtained in the province; and without detracting at all from the merits of the respectable practitioners of our art in Kingston, we would humbly submit that, as is the case in other countries, the description of talent most likely to be highly estimated by the public is generally to be found in the dense and wealthy population of a metropolitan city. In looking forward to the future, the period we hope is not far distant when the beneficial operations of the ample endowment of a university in this city will be available for the instruction of medicine.

The pressure (presence?) of an institution for the cure of mental diseases as an adjunct to the present practical benefits offered by the general hospital will present to the student of medicine advantages of an importance that he should not, for trifling considerations, be deprived of. The rapid strides with which the science of mental pathology has of late years advanced would lead to the hope that the opportunities for observation in so large a field as this asylum would present will not be lost to the medical student of our future university through an error which, when once consummated, cannot be remedied.

We shall not be deemed visionary when we declare to Your Excellency that the first fruits of an effective organization of a school for medical instruction, of which the projected lunatic asylum should form a part, will afford results of an immensely valuable nature, both politically and morally, to the inhabitants of this favored province.

If we are deprived of the important addition which we pray for, and the asylum is removed without the pale of the university, we consider that it will be shorn of a most valuable and important feature in its usefulness.

Having pointed out the reasons which more immediately concern us as a professional body, we would suggest to Your Excellency one of a character which, as citizens, we cannot allow ourselves to pass over unnoticed. The House of Assembly in its last session was moved to address His Excellency the Governor-General for reasons then brought forward, praying that His Excellency would cause the asylum to be located in Kingston.

This motion being negatived by a large majority of the House is a proof that the feelings of the representatives of the people were opposed to the measure now about to be adopted by Your Excellency, and cannot fail to strike us as a proof that it would be highly unpopular generally in the province.

In the hope that Your Excellency will consider the importance of the subject submitted to Your Excellency in this address as a sufficient excuse for trespassing upon Your Excellency's valuable time, we conclude by earnestly entreating Your Excellency to reconsider the determination which Your Excellency has arrived at.¹

The result of this and other pressure brought to bear was that the Lieutenant-Governor abandoned his idea of locating the asylum at Kingston, and Toronto was definitely determined on as its site.

Since the passage of the bill authorizing the erection of its first lunatic asylum, and the final selection of Toronto as the location of the said institution, Ontario has made wonderful progress in providing for the care and comfort of its insane. "Excelsior" has been the motto of the province, which, instead of one, has now ten public hospitals, inclusive of one each for idiots and epileptics. These afford accommodation for a population of about 7000. There are also two private sanatoria for the treatment of nervous and mental cases as well as drug and alcoholic habitués. The aim of the government has been to keep abreast, so far as possible, with the results of psychiatric research, and with this end in view there is now under construction at Whitby a thoroughly equipped modern hospital for the insane to replace the one in Toronto, which has done duty for nearly three-quarters of a century.

Pari passu with the creation of additional buildings as needed, changes have from time to time been made in the lunacy laws, all trending toward the betterment of the condition of the insane, so that at present the statutes leave little to be desired beyond the elimination of the leaven of political patronage which still exists as regards the appointment of officials. Happily this also is being gradually lessened, so that we now see occasional promotions of deserving officers instead of their being selected from among outside medical men on account of political services rendered.

¹"The Medical Profession in Upper Canada," 1783 to 1850, by W. Canniff, M. D., p. 148.

The provincial asylum system, as now existent, dates back to the year of Confederation, when among the exclusive powers vested in the Legislature, by the British North America Act, was "the establishment, maintenance and management of asylums." Prior to 1867 the insane were cared for jointly by the United Provinces of Upper and Lower Canada.

Probably the most far-reaching and beneficial of the changes wrought under the new system was the superseding by one inspector, in 1868, of the former Board of Inspectors. Through this new appointee acting under the direction of the Hon. Provincial Secretary, the asylums were brought under direct governmental supervision.

In 1871 still further progress was made by the Legislature passing "An Act Relating to Lunatic Asylums and the Custody of the Insane." This act definitely defined the duties of asylum officers, the terms upon which patients were to be admitted, the rate of their maintenance, and provided for the proper administration of estates of the insane by the inspector.

Again, an act legalized at the legislative session of 1913, and entitled "An Act Respecting Provincial Hospitals for the Insane and the Custody of Insane Persons,"¹ contains several reforms along the lines of progressive legislation. Among these are the substitution of the term "hospital" for "asylum"; provision for the admission of voluntary patients; and the forbiddance of the confinement of any person alleged to be insane in a gaol, lock-up, prison or reformatory while the question of sanity is being determined and while waiting admission to a hospital. By the latter provision it becomes incumbent upon municipalities to provide some suitable place where an insane person may be comfortably detained until the inspector and superintendent of the hospital for the district can be communicated with and admission to the hospital secured.

The same act reaffirms that the Inspector of Asylums shall be, *ex-officio*, the committee of every insane person who has no other committee, and who is detained in any hospital, sanitarium for mental diseases, or place of safe custody, unless the High Court of Division shall appoint a committee for such patient, in which case the duties of the inspector as such shall cease.

¹ Revised Statutes of Ontario, Chap. 295, 1914.

During the same session of the Legislature there was also passed an act revising that in force respecting private sanitarium for mental diseases, drug and alcoholic habitués.¹ This ordains that all such institutions shall be under the supervision of the Inspector of Asylums and a Board of Visitors. The board is composed of the judge of the county or district court, the clerk of the peace and the sheriff of the county or district in which the sanitarium is situate, together with two legally qualified medical practitioners appointed by the Lieutenant-Governor in Council, who shall hold office for three years unless sooner removed by him. No member of the board shall be pecuniarily interested in any sanitarium, either directly or indirectly, and no medical practitioner who is a member of it shall sign any certificate for the admission of a patient into any sanitarium, or shall professionally attend upon any patient therein, unless he is directed to visit such patient by the person upon whose order such patient has been received into the sanitarium, or by the minister or one of the judges of the Supreme Court, or by some person appointed by one of such judges for that purpose. Every sanitarium is to be visited and inspected four times in the year by two of the members of the board, one of whom shall be a legally qualified medical practitioner; and at least once yearly by the inspector. The visitors and inspector, when visiting any sanitarium, are to inspect every part of it, and every house, out-house, place and building communicating with it, or detached from it, and every part of the ground and appurtenances held, used or occupied therewith, and shall inquire whether any patient is under restraint, and why, and shall inspect the order and certificates for the reception of every patient who has been received since the last visit. Minutes are to be made as to:

(a) The condition of the sanitarium, its furniture, furnishings and surroundings.

(b) The appearance of the patients, particularly noting if there are any marks of violence.

(c) The condition of the beds and bedding.

(d) Whether the dietary is suitable and the food service satisfactory.

(e) Whether the staff is sufficient.

¹ *Ibid.*, Chap. 296.

(f) The number of patients under restraint or in seclusion, with the reasons stated therefor.

(g) Any irregularity in the order or certificate.

(h) Whether the previous suggestions, if any, of the inspector or visitors have been attended to.

(i) Any matter as to which they deem it proper to make observations.

The visiting officials are also to make inquiries on the following points:

(a) Whether divine service is held, for what number of patients, and the effect thereof.

(b) What occupations or amusements are provided for the patients, and the result thereof.

(c) Whether there has been adopted any system of non-restraint, and if so, the result thereof.

(d) The classification of patients.

(e) Whether there is any patient who should be discharged.

(f) Whether the building, its furniture and furnishings are suitable.

(g) Whether the nurses are properly trained for the work in which they are engaged, and how many trained graduate nurses are employed.

Coincident with the aforesaid there was passed a law entitled "An Act Respecting Reception Hospitals for the Insane," by which it was enacted that the corporation of any city having a population of more than 100,000 persons may, with the approval of the Lieutenant-Governor in Council, establish and equip a reception hospital for persons who are insane and whose condition renders it desirable that they should be placed under observation and treatment for nervous and mental diseases. Such hospitals are to be placed under the control of the member of the Executive Council charged for the time being with the administration of the provincial hospitals for insane, and the Lieutenant-Governor in Council is empowered to make regulations for their management and general administration. The conditions of admission are similar to those prescribed in The Hospitals for the Insane Act, but when a person alleged to be insane has been apprehended under a warrant he may be committed to the hospital until the question of his sanity has been determined; if, after admission,

he is found to be not insane or is unsuitable for treatment in a provincial hospital for the insane, he is to be discharged into the custody of the person through whom he was admitted.

The growth of the Ontario asylum system has been commensurate with the increase in the number of its insane, owing, in great measure, to the rapidly increasing population in this as in others parts of the Dominion. Thus, according to the census of 1901, Ontario had an insane and mentally defective population of 7552, while according to that of 1911 (the last taken) it amounted to 8831. Of the latter number, plus whatever increase may have taken place in the interval, the close of the year 1913 showed 6931 under institutional care.

TORONTO ASYLUM AND ITS BRANCHES.

That the need of accommodation for the insane was urgent, and that there was no disposition on the part of the people to await the erection of an asylum proper ere this truly afflicted class could be cared for, had been evidenced by the fact that in the spring of the year 1840 (February 8) the House of Assembly, through the Speaker, Sir Allan N. McNab, had presented an address to His Excellency the Right Honorable Charles Poulett Thomson, Governor-General of British North America, reading as follows:

May it please Your Excellency, we, Her Majesty's dutiful and loyal subjects, the Commons of Upper Canada, in Provincial Parliament assembled, humbly pray that Your Excellency will be pleased to direct that a suitable building be provided forthwith as a temporary asylum for the many unfortunate persons afflicted with lunacy in this province, and beg leave to assure Your Excellency that this House will make good the expense that may be incurred thereby, and in affording relief to such subjects of distress.¹

At the beginning of the ensuing year the urgency of the case was made still more apparent when the old York jail was abandoned. Erected in 1824, this was a substantial, two-storied, red-brick structure, facing toward King Street, on the north side of which it was situated, between Toronto and Church streets.²

¹ Journal of Legislative Assembly of Upper Canada, 1839-40, p. 363.

² This building, which stood at what is the corner of Toronto and Court streets, was never completely torn down, but remodelled into part of the York Chambers which now occupy its site.

In its basement cells there had been confined a number of lunatics. It became a question whether these should be transferred with the prisoners to the new jail which had been opened at the east end of the city.

The Hon. Mr. Jamieson, chairman of the board of commissioners for the erection of a lunatic asylum, took upon himself the responsibility of advising the sheriff of the Home District, Mr. W. B. Jarvis, to leave them where they were, and having secured the building at a rental of £125 per annum, fitted it up as a temporary asylum for their use. This institution, which was opened January 21, 1841, by the enrolment of 17 patients, before confined as prisoners, was the first lunatic asylum in the Province of Ontario. It was placed in charge of Dr. William Rees, who had long urged upon the government the necessity for such an establishment, and who, in September, 1840, had been nominated medical superintendent of the then proposed, now realized, temporary asylum.

This action of the chairman of commissioners was confirmed by the Lieutenant-Governor, Sir George Arthur, to whom, in his report made through His Excellency's secretary, Mr. S. B. Harrison, in September of this same year, Mr. Jamieson thus details the opening of the new establishment, and the happy change wrought thereby in the condition of the wretched prison lunatics :

The necessary steps were taken as soon as the prisoners were removed to the new gaol to render it fit for its new purpose. The building was cleaned and purified, and such repairs, external and internal, were made and such furniture, clothing, etc., purchased as were indispensable. The patients (heretofore confined as prisoners) were taken from the cells in which they were closely confined, and where they had long, from the dire necessity of the case, been permitted to remain in filth and nakedness and impure air, all confirming their maladies, and placed in the now purified and airy debtors' room, carefully washed, clothed and placed under medical care, their food critically adapted to their physical state, and in fact everything done which the constant attention of a person devoted to his purpose could effect by the aid of the very limited means we could afford him. The effect of this new course of life was soon apparent; many who had long been confined as confirmed lunatics were found laboring not under mania, but under derangement arising from physical causes and yielding to physical remedies. Several have completely recovered who, but for this treatment, would probably never have exhibited another gleam of reason. So much good could, I am sure, never have been effected by mere occasional visits of a physician, however skilful. The state of the asylum

and the success with which it has been conducted drew forth the approbation of the grand jury who visited it on the 10th of June last. Until the institution be properly organized and the means of permanent support secured, it is not possible to throw it open for the reception of all who need it. There has, however, been a regular succession of new cases admitted, some of which have been successfully treated and the patients discharged.¹

From the same report we learn that there were admitted during the first half year, namely, from January 21 to July 31, 7 men and 8 women, who, with the 11 men and 6 women originally prisoners in the jail, made a total of 32 patients under treatment. The staff consisted of the medical superintendent, a steward, a housekeeper and two servants, assisted by four persons from the district jail. The total expense for the period stated was £259 5s. 7d., being an average daily expenditure of 1s. 5d. per patient.

As commissioners for the management of the temporary lunatic asylum, the Lieutenant-Governor was pleased to appoint the Hon. R. S. Jamieson, W. B. Jarvis, Esq., W. C. Gwynne, surgeon, and John Ewart, Esq.² These gentlemen in their first report, that for 1842, detailed their having met at the asylum, and in compliance with a request of His Excellency framed a code of rules for the conduct of the institution by the medical superintendent and steward, as well as for the guidance of the matron and servants employed therein. They also reported having examined the steward's accounts and reduced his charges for the board of each patient from 10s. to 7s. per week, and that later they had made arrangements for the board of the patients at 6s. per week.³

In the first report of the medical superintendent, appended to that of the commissioners, Dr. Rees expresses his belief in non-restraint, and regrets that they have so little room for exercise, but says he has made the best use possible of the yard and also sent patients out walking on the streets with trusted attendants, and others to the bay to fish.

In July, 1843, the original commissioners for the management of the temporary asylum were, in accordance with the provisions

¹ Journal of Legislative Assembly of Canada, Appendix LL, Kingston, September 22, 1841.

² Canada Gazette, December 29, 1841, p. 196.

³ Journal of Legislative Assembly of Canada, Appendix U, October 4, 1842.

of the act of 1839, increased in number to 12 by the addition of W. R. Beaumont, surgeon; William Cawthra, Esq.; John Eastwood, Esq.; Rev. H. J. Grasett, Rev. J. J. Hay, William Kelly, Esq.; Martin J. O'Bierne, Esq., and Rev. John Roaf.¹

The old jail, which seems to have afforded accommodation for barely 100 patients, in a few years was found inadequate to meet the demands for admission. Additional quarters were therefore sought elsewhere in 1846. The old red-brick Parliament buildings situated on Front Street, between Simcoe and John streets, the erection of which had been begun in 1825 (after those at the east end of the town had been destroyed by fire in 1824) and completed in 1833, were then unoccupied, having been disused for legislative purposes since the union of the provinces in 1841. The increased accommodation required was procured by occupying for asylum purposes the east wing of this structure, supplemented by a rough-cast dwelling-house with a veranda on three sides, the property of a Mr. Dunn, which stood at the southwest corner of Front and Bathurst streets.

Up to 1850, when they were abandoned, the condition of these temporary establishments was far from creditable, a fact in great measure due to the changes in management which occurred with startling rapidity.

The cause of these frequent changes is to be found in differences between the Board of Directors and the superintendents. Unfortunately, the act authorizing the creation of an asylum had vested the property in the Board of Directors instead of in the Crown, thus making them almost independent of the government, while at the same time it but inadequately defined the position of the superintendent, whose powers were not sufficiently extensive to enable him to enforce discipline. The employees took their orders from the directors, by whom alone, according to the terms of the act, they could be hired or discharged, rather than from the superintendent. The natural result was anarchy and neglect of the patients. As stated by Dr. Rees, all the difficulties were traceable "to the prevailing system for managing the servants, who, under a common system of favoritism and patronage, were selected, appointed, retained and dismissed at the pleasure of the commissioners, without even a decent regard to the wishes, opinion

¹ Canada Gazette, July 8, 1843, p. 808.

or objections of the medical superintendent, who was often obliged to retain servants against whom he had preferred frequent and serious charges.”¹

Dr. Rees seems to have fought hard for the necessary authority to carry on the institution in a proper manner, but the commissioners were too strong for him, and on October 2, 1845, he was dismissed.

Dr. Rees was succeeded as medical superintendent by Dr. Walter Telfer, a native of Scotland and the holder of a diploma from the College of Surgeons, Edinburgh. Dr. Telfer had settled in Niagara about 1826, but in 1835 had removed to Toronto, where he soon commanded a large practice. After something over two years' service as superintendent he was charged with intoxication while on duty and with the appropriation of institution supplies. The evidence against him does not seem to have been at all conclusive, but the result, nevertheless, was his dismissal by the Governor-General on April 17, 1848. Dr. Telfer's removal from office was the cause of a great deal of newspaper controversy, but does not seem in the least to have affected his standing in the community or profession. He again resumed practice in the city, where he was given a place on the staff of the Toronto General Hospital, and at the time of his death, in 1857, was an active member of the Upper Canada Medical Board.

The next choice of the commissioners was Dr. George Hamilton Park, whose chief qualification was at the time said to have consisted in his being brother-in-law to Dr. John Rolph, then a man of much political influence. The appointment was made May 31, 1848. Almost immediately there was the same old difficulty between the superintendent and the commissioners, each claiming supreme authority in the engagement and discharge of employees. On one occasion Dr. Park discharged an attendant for drunkenness and insubordination. The board reinstated him. Dr. Park immediately discharged him again. The board reinstated him a second time. The man was finally discharged for some offence that even the board could not condone. On another occasion Dr. Park engaged an attendant and a cook. The board dismissed them. In retaliation Dr. Park suspended the steward, who had

¹ British American Medical and Physical Journal, Montreal, August, 1851, p. 181.

been engaged by the board, and intimated his intention to treat all the attendants similarly. As a result of this the board resigned, but the government refused to accept the resignation. At last the antagonism reached such a pitch that Dr. Park threatened to call in the police to support his authority. Finally, on the 26th of December, 1848, after less than seven months' service, the doctor was dismissed. The charges against him were:

1. He manifests a disposition to interfere in the general affairs of the institution. For example, he gives orders respecting the diet of the servants.
2. He made arrangements with a merchant to supply a quantity of blankets.
3. He insisted, in defiance of the rules, that he had a right to be present at the meetings of the board.¹

Dr. Park gave place to Dr. Primrose, whom the board appointed acting superintendent only, so that, it was currently reported, the position of superintendent of the new asylum, then nearly completed, might be kept open for a Dr. Scott, son-in-law of the Rev. Mr. Roaf, one of the commissioners. Be that as it may, Dr. Primrose retired at the close of 1849, after about eleven months' service, in favor of the aforesaid Dr. Scott.

The state of affairs with regard to the patients under such a system of management as we have described could not but have been bad, and is thus depicted in a brief history of the asylum by a one-time superintendent of the institution. Quoting from a report of one of his early predecessors, Dr. Daniel Clark says:

When the superintendent first entered upon the duties of his office he found, as might readily be supposed from what had occurred previous to his appointment, the institution in a very bad state. There was not clothing enough of any or all kinds for a change; there were several patients that had been naked for several months, constantly confined in cells, or, if quiet, lying on the floor of the attic ward—a place where from 60 to 70 patients were constantly kept in a very filthy condition; as they were the worst class of patients, they were not let out at all into the yard or open air. The stench of this ward was scarcely bearable from the great amount of filth that had been allowed to accumulate in different parts of it. The other wards were not quite so bad, but there was no part of the whole establishment which was not dirty and otherwise badly attended to. There were no baths or proper arrangements for cleaning the patients; the cells and sleeping apartments were confined and filthy, the beds and bedsteads full of vermin; the noisy and restless patients were kept for days and

¹ Journal of Legislative Assembly of Canada, 1849, Appendix M, No. 1.

nights together locked in cells, as an easy mode of getting rid of taking care of them. The keepers and servants were in the habit of going in and out of the asylum without permission, the clothing and other articles belonging to the institution had no marks upon them by which they could be distinguished from other articles of a similar kind, for the want of which, no doubt, the institution has suffered much loss.¹

Admitting that this statement may be too highly colored as the production of one willing to decry a predecessor in office, it yet cannot be wholly devoid of truth, and as such presents a striking picture of asylum management in those days as compared with the present.

Of the medical treatment about the same period we have the testimony of a disinterested outsider in the person of Mr. J. H. Tuke, brother of the eminent alienist, the late Dr. D. Hack Tuke, who, on visiting Toronto in 1845, made the following entry in his diary:

TORONTO, September 30, 1845.

Visited the lunatic asylum. It is one of the most painful and distressing places I ever visited. The house has a terribly dark aspect within and without, and was intended for a prison. There were, perhaps, 70 patients, upon whose faces misery, starvation, and suffering were indelibly impressed. The doctor pursues the exploded system of constantly cupping, bleeding, blistering and purging his patients; giving them also the smallest quantity of food, and that of the poorest quality. No meat is allowed.

The foreheads and necks of the patients were nearly all scarred with the marks of former cuppings, or were bandaged from the effects of more recent ones. Many patients were suffering from sore legs, or from blisters on their back and legs. Everyone looked emaciated and wretched. Strongly built men were shrunk to skeletons, and poor idiots were lying on their beds motionless and as if half dead. Every patient has his or her head shaved. One miserable courtyard was the only airing court for the 60 or 70 patients—men or women. The doctor, in response to my questions, and evident disgust, persisted that his was the only method of treating lunatics, and boasted that he employs *no restraint* and that his cures are larger than those in any English or Continental asylum. I left the place sickened with disgust, and could hardly sleep at night, as the images of the suffering patients kept floating before my mind's eye in all the horrors of the revolting scenes I had witnessed.²

Luckily, during this early period of squabbling, mismanagement and neglect, the erection of a proper asylum was not alto-

¹ Reports of Asylums, Prisons and Public Charities of Ontario, 1878, p. 261.

² The Insane in the United States and Canada, by Dr. D. Hack Tuke, p. 215.

gether lost sight of. Fifty acres of the Ordnance Department lands at the west end of the city,¹ known as the "Government" or "Garrison Common," having been granted by the home government for the purpose, a commission was appointed, September 24, 1844, to superintend the erection of a permanent asylum thereon, after designs prepared by Mr. J. G. Howard, architect. The gentlemen composing the commission were Hon. R. S. Jamieson, Mr. H. H. Killaly, his worship the mayor of Toronto, Dr. Christopher Widmer, Dr. John King, Mr. John Ewart and Mr. James Grant Chewitt.² Subsequently, in 1845, Mr. Henry Sherwood, Mr. Wm. R. Beaumont, surgeon, and Mr. W. B. Jarvis were added to the number of the commissioners.

Work was begun June 7, 1845, and on August 22, 1846, the corner-stone was laid with imposing ceremony by the Hon. John Beverly Robinson, Chief Justice of the province, in the presence of the most noted members of the learned professions, the mayor and corporation, the various national societies, and the inhabitants of the city generally.³

The original design for the asylum comprised a main portion four stories in height, with a central portion of five stories, surmounted by a handsome dome 40 feet in diameter. Extending at right angles from the main building were wings, also four stories high, the whole forming three sides of a parallelogram. The total length of the main structure and wings was 1014 feet. The material employed in construction was white brick, with cut stone trimmings. By January 26, 1850, the main building was sufficiently advanced to admit of the transfer of the patients, 211 in number, from the Parliament buildings, old jail and Bathurst

¹ In 1870 this property was increased by the purchase from the Dominion Government of 150 acres adjacent for farming purposes. Unfortunately, however, this was subsequently taken from the asylum and used as the site for the old exhibition buildings. A part of it is now occupied by the Central Prison and Mercer Reformatory. In 1888 24 of the original 50 acres were sold by the government for building lots, so that only about 30 acres remain attached to the institution, an amount disgracefully inadequate for a population of over 700 patients.

² Canada Gazette, September 24, 1844, p. 1434.

³ See Appendix A.

Street house. The wings were not completed until 1869 and 1870.¹ This hasty removal was rendered imperative in the case of the first-named edifice by the fact that after the burning of the Parliament buildings at Montreal by a mob on the night of April 25, 1849, Lord Elgin and his ministers had decided that the two remaining sessions of the existing Parliament should be held in Toronto. The old building was, therefore, once more required for legislative purposes, the session having been called for May 14, 1850.

The official title of the new institution was "The Provincial Lunatic Asylum," which it retained until 1871, when by statute of Ontario it became "The Asylum for Insane, Toronto."²

The first superintendent of the new establishment was Dr. John Scott, whose appointment dated from January, 1850. As was inevitable under the system of management governing it, differences between the superintendent and the commissioners soon began to crop up. Within 18 months, namely, on July 2, 1851, an attendant, John Copping, made a series of charges against Dr. Scott. Of these the most important were: That his deportment was ungentlemanly; that he called the patients and attendants such names as "lazy brute," "sleepy-head," and "sloven"; that he spoke of Dr. Widmer, chairman of the Board of Commissioners, as "an old fool," and of the matron as "a peacock"; that he refused an attendant leave to see his child when at the point of death; that he put patients on bread and water for bad conduct; that he used a large quantity of institution carrots for his horse; and that he caused a certain suicidal patient to be put alone into a room in which she hanged herself to the bed-post.³

The charges were investigated by the commissioners, who reported that the medical superintendent was lacking in consideration to the officers and servants; that he was ill-tempered, and that he at times made unbecoming and injudicious remarks. No action was taken, however.

¹ Two hospitals to accommodate 27 patients each were commenced at the same time as the wings, from which they were distant about 200 feet. These were opened in 1867.

² 34 Vict., Cap. 18.

³ British American Medical and Physical Journal, Montreal, August, 1851, p. 181.

A few months later—November 12—one of the city papers published a startling announcement to the effect that the Toronto Asylum was being converted into a dissecting room. A patient, one George Andrews, having died at the asylum, the usual inquest was held by Coroner Duggan, and the body coffined and sent to the potter's field for burial. The sexton thinking the coffin light, opened it, and found an arm, a leg and the head missing. Two days later, a box was sent from the asylum for interment. This was found to contain the parts wanting. On these a second investigation was begun before Coroner King, at which it was shown that there had already been an inquest held on the body to which these portions belonged. Dr. King, therefore, decided that a second enquiry was unnecessary.¹ This exposure having caused much excitement among the citizens, the Board of Commissioners held a meeting, at which Dr. Scott admitted that he had removed parts of the body for anatomical purposes. In consequence it was moved that "The medical superintendent has, by his conduct in mutilating the body of a deceased patient, laid himself open to the charge of indiscretion and want of judgment, and that he be and is hereby severely censured and admonished therefor."

After this the difficulties between the superintendent and commissioners grew from bad to worse, and culminated in the resignation of the former in 1852.

Dr. Scott was succeeded on July 1, 1853, by Dr. Joseph Workman, whose labors on behalf of the insane will ever remain one of the brightest spots in the annals of Canadian asylums. Dr. Workman accepted temporary charge of the asylum at the personal solicitation of the Hon. Dr. Rolph, then president of the Council in the Hincks-Morin administration. His appointment was made permanent on April 1 of the following year.²

Possessed of much energy and great executive ability, Dr. Workman, during his management of Toronto Asylum, introduced many improvements, one of the first of which was a reconstruction of the drainage. On taking charge he had found 347 patients in residence, many of whom had frequent attacks of erysipelas, diarrhœa, or dysentery. Setting to work to investigate

¹ British American Medical and Physical Journal, Montreal, December, 1851, p. 361.

² Canada Gazette, 1854, p. 523.

the cause, he soon made the discovery that the whole of the space beneath the basement was one foul and enormous cesspool. When this was emptied it was found that, while the basement drains and main sewer were admirably constructed, by some oversight no connection had been made between them, the result being that nearly four years' accumulation of filth had collected there. The proper junctions made, a reorganization of the ventilating and water-closet systems followed, and there ensued a marked improvement in the general health of the household.¹

In these and other reforms Dr. Workman was greatly aided by the fact that, prior to his assumption of office, there had been a radical and much-needed change in the system of governing the asylum. On June 20, 1853, the old board of 12 directors was replaced by a visiting committee, the original members of which were George S. Tiffany, Esq., of Hamilton; Ezekiel F. Whittemore, Esq., of Toronto; John Simpson, Esq., of Bowmanville, and William L. Perrin, Esq., of Toronto.² The act authorizing this change also vested the property in the Crown; placed the appointment of the medical superintendent, as well as that of a bursar, in the hands of the government, and gave to the superintendent power to hire and dismiss all officers and servants other than the bursar.³ This new system of control remained in force up to December, 1859, when, under provision of the Consolidated Statutes of Canada, the visiting committee was superseded by the appointment of a board of five inspectors by the legislative assembly.⁴ The first report of this board was made at Quebec, addressed to His Excellency Sir Edmund Walker Head, Bart., Governor-General of the British Provinces of North America. It was dated March 16, 1860; styled "Preliminary Report of the Board of Inspectors of Asylums, Prisons, etc.," and signed Wolfred Nelson, M. D., president; J. C. Tache, M. D., D. Æ. Macdonald, John Langton and E. A. Meredith.

On taking up the reins of government, Dr. Workman had found the asylum much overcrowded, and this overcrowding was con-

¹"A Description of the Pestilent Condition of the Toronto Lunatic Asylum in 1853," by Dr. Joseph Workman. *Sanitary Journal*, Toronto, January, 1876.

²Canada Gazette, September 10, 1853, p. 1323.

³Statutes of Canada, 16 Vict., Cap. 188.

⁴Statutes of Canada, 16 Vict., Cap. 110.

stantly increased by applications to which he was unable to refuse admission. In his first annual report, therefore, dated June 19th, 1854, he complained that "The asylum, when completed according to the original designs, was calculated to accommodate suitably 250 patients. The two wings, each as capacious as that portion of the house now available in each section of this building, east and west, for lodgment of lunatics, have not yet been erected; consequently 376 patients are at present crowded into one-half the space originally intended to be bestowed upon 250; or, in other words, three are thrust into the space intended for one."¹

To relieve this congested condition, in July, 1856, a building which had been erected as the commencement of the University of King's College, about 13 years previously, was converted into a supplemental asylum. The new adaptation, known as the University Branch, was placed under the charge of Mr. Robert Blair. It was built of white cut stone, and occupied a part of the ground on which the new Parliament buildings now stand, the material that composed it having been used in their construction. This addition received about 70 patients, principally women, all of whom were transferred from the main asylum, and one of the medical officers of that building visited it daily. It remained in use for a period of 13 years and was abandoned in October, 1869, on the opening of the new female wing of the parent establishment.

The temporary relief from overcrowding thus obtained was soon exhausted, and in the summer of 1859 it was decided by the government to convert the old military barracks at Fort Malden, near Amherstburg, into another branch asylum. With the view of effecting this object, Dr. Andrew Fisher, one of Dr. Workman's assistants, was appointed medical superintendent, with instructions to have the necessary alterations and repairs effected in the shortest possible time. Dr. Fisher, accompanied by 20 male patients to assist in making the needed changes, reached Fort Malden on July 14, and by October had so pushed forward the work that he was able to receive another detachment of 64 patients from the provincial asylum; and by December, a third. The old barracks, which had done service as a military post during the troubles of 1837 and up to about 1858, were large, two-story (with an attic) frame buildings, but ill adapted for asylum purposes, inasmuch as they

¹ Original manuscript report by Dr. Workman.

contained no single rooms, and all the dormitories opened into one another. The situation, however, was excellent. The grounds, 58 acres in extent, afforded ample scope for recreation and agricultural pursuits, and the outlook over the Detroit River was unsurpassed. Malden continued a branch of and was fed from Toronto Asylum up to September 24, 1861, when, by order of the Governor-General in Council, it was made an independent institution, and had assigned to it as feeders the seven adjacent counties of Norfolk, Oxford, Middlesex, Kent, Elgin, Essex and Lambton.¹ It continued under the administration of its first superintendent up to June, 1868, when, fault having been found with his management, Dr. Fisher resigned, to be succeeded July 1 by Dr. Henry Landor.

The year of the conversion of Malden into an independent establishment witnessed the birth at Orillia of yet a third child of the provincial lunatic asylum. This (the Orillia branch) was established in a large three-story brick building, which, originally designed for a hotel, but left unfinished, had been purchased in 1859 for \$16,800 by the provinces of Canada and fitted up as an asylum. It was opened August 13, 1861, under the charge of Dr. John Ardagh, and continued in operation up to November, 1870, when it was abandoned on the transfer of the patients to a new asylum, then opened at London. The services of Dr. Ardagh were at this date dispensed with, there being no longer an institution for him. Intended for the express purpose of housing chronic and incurable lunatics, the Orillia asylum was absolutely dependent upon the Toronto institution, whence all its occupants were transferred with the exception of about a dozen cases admitted direct at various times with the consent of Dr. Workman.

For 22 years Dr. Workman devoted himself to the work of helping the most unfortunate class in the community, at the end of which period, viz., on July 19, 1875, he resigned his position as superintendent to seek a well-earned rest from his useful but arduous labors. Such success as he achieved can come to few,

¹ Prior to this the Toronto Asylum had received patients from the whole of Upper Canada. As now allocated, the Toronto district embraces only the City of Toronto and the County of York, but inasmuch as its asylum contains the only state pay-wards, these are available for private patients from all sections of the province.

and yet no true man could be jealous of the high place that must be accorded him, so clearly was he entitled to his honors.

On the retirement of Dr. Workman, Dr. Benjamin Workman, assistant superintendent, retained charge for a few weeks until the arrival of Dr. Charles Gowan, who had been an assistant in the Worcester Asylum, England. He then left the asylum after an honorable service which had extended over a period of 19 years.

Dr. Gowan was a young man of fine type and broad education, but had no inkling of the great differences existing between methods in England and Scotland and Canada. He came to the country fully possessed of the idea that he must at once turn the asylum topsy-turvy and initiate what he believed were reforms. If he had been well-advised he would have quickly observed the true condition of affairs, and when he had learned that what was suited to Worcester would not answer in Canada he would have made an excellent administrator, as he possessed all the qualities necessary to ensure success. Then again his troubles were greatly increased by medical and other politicians who did not wish to see as luscious a plum as the superintendency of the Toronto Asylum fall into the mouth of a rank outsider. Some members of the Medical Council found, or thought they found, a sound point for an attack on the young superintendent, by asserting that he could not become a registered practitioner in Ontario without passing the Council examinations. As a matter of fact, the law was such that Dr. Gowan might have registered in spite of the Council, but he did not find that out and took his persecution, and persecuted he undoubtedly was, greatly to heart. It was not long before he gave evidence of deep depression and developed a psychosis that nearly terminated fatally. He retired after a brief reign, greatly beloved by those who had learned to respect him and who bitterly resented the cruel treatment meted out to this stranger by the few wire pullers who had no higher object to serve than their own selfish interests.

On Dr. Gowan's retirement Dr. W. G. Metcalf, who was assistant superintendent, having followed Dr. Benjamin Workman, took charge and held the position of acting superintendent until Dr. Daniel Clark was made the head of the institution. It was always a matter of regret among asylum men that Dr. Metcalf was not given the superintendency, as he was splendidly qualified

for the post, having been trained in psychiatry by Dr. Joseph Workman. His career and tragic death will be dealt with at length under the history of Kingston Asylum.

Dr. Clark proved himself a successful administrator of the asylum from December, 1875, until October, 1905, ruling its affairs with wisdom and efficiency. In the latter year he retired to private life, taking up his residence in Toronto, where he remained until his death, which took place in September, 1912.

The only structural change of note in the institution during the reign of Dr. Clark was the erection of a detached residence for the medical superintendent. The occupation of this, in May, 1878, allowed of a reallocation of his previous official quarters in the asylum. These were devoted to new offices for himself and the bursar, rooms and a general dining-room for the assistants, and a spare room to be kept for the accommodation of friends of patients who might be delayed overnight through unforeseen causes.¹

Dr. Daniel Clark was followed as superintendent by Dr. Charles K. Clarke, who had commenced his psychiatric experiences in Toronto Asylum as a student under Dr. Joseph Workman in 1874, and had also served under Dr. Daniel Clark until 1880, when he became assistant superintendent of Hamilton Asylum. Dr. Clarke's career as a superintendent will be dealt with more fully under the history of Rockwood Asylum, as it was there he made his reputation and evolved the ideas which dominated his career in asylum work. To return to the old Toronto Asylum was in many ways no doubt an attractive change, as it opened up possibilities before only dreamed of, and he had a warm affection for the institution in which he had spent so many of his boyhood days. He threw himself into the work of making the Toronto Asylum up to date with his accustomed energy, and, with a strong penchant for modern methods, infused as much life as possible into psychiatric matters generally. He organized a training school for nurses, developed a good laboratory and was soon surrounded by a band of young enthusiasts who took up the Kraepelin methods with avidity and developed a system of history-taking that marked a new era in Ontario methods. He advocated the building of a

¹ Eleventh annual report of inspectors of asylums, prisons and public charities for the Province of Ontario, 1878.

psychiatric hospital in Toronto, and, having enlisted the sympathies and backing of the Hon. W. A. Hanna, Provincial Secretary, and several prominent citizens, went in 1907 to Europe with Drs. E. Ryan and the Hon. Dr. Willoughby to study methods in the European psychiatric clinics, notably those of Germany. The results of this trip are embodied in an extensive and interesting report published in January, 1908,¹ in the Bulletin which he edited. The result of this trip was the inclusion of a large sum of money in the provincial estimates and for a time it seemed as if Toronto would have the first psychiatric clinic established in America. Petty jealousies and other influences eventually hardened the hearts of the politicians, and although Mr. Hanna kept up his interest, if not his enthusiasm, it was evident that the scheme was doomed for the time being.

Dr. Clarke was soon appointed professor of psychiatry in the University of Toronto, and in 1908 was made dean of the medical faculty, it being felt that, not being hampered by local entanglements and possessing good executive ability, he might guide this body of professional men without friction. Before many years it was evident that Dr. Clarke was not as optimistic as was ordinarily his wont in regard to the outlook for psychiatry in Ontario; the clinic idea began to be overshadowed in the Ontario Cabinet by prison reform, and it became apparent that he would branch out and act independently before long. The opportunity came when the trustees of the Toronto General Hospital, who had committed themselves to the enormous task of erecting a 700-bed institution on College Street, asked him to become their superintendent. The fact that the hospital was so intimately associated with the university evidently had its effect and Dr. Clarke accepted the appointment and resigned the superintendency of Toronto Asylum on May 15, 1911. While in charge of that institution he developed the scientific side of the work with the greatest zeal possible, but, having made sure that politicians would block the wheels of progress in spite of all his endeavors, felt certain that he could be of more assistance to the cause of psychiatry outside the service than in it, so no surprise was felt when he resigned.

A successor to Dr. Clarke was found in the person of Dr. J. M. Forster, a graduate in 1886 of Toronto University, who still

¹ Bulletin of the Toronto Hospital for the Insane, January, 1908.

holds office. Dr. Forster, who had been trained in several of the Ontario asylums, and who, after many years' service, had been rewarded by a well-merited promotion from the assistant superintendentship of London to the superintendency of Brockville Asylum, took charge of the establishment on May 16, 1911. Fortunately, he is an enthusiastic, experienced and capable administrator, because upon him has been thrown the grave responsibility of directing the affairs of what virtually amounts to three hospitals at the same time. Shortly after his appointment the government decided to sell the Toronto Asylum property and to build a modern hospital at Whitby, so that Dr. Forster has at the present date the task of governing Toronto Hospital, a wing of the Mercer Reformatory, officially known as the King Street Branch of the Toronto Asylum,¹ and a colony at Whitby. In addition, he acts in an advisory capacity, from a medical standpoint, in the construction of the Whitby institution. He has, however, won his spurs, and when the last-named establishment is completed, will have an opportunity to develop what should be one of the model mental hospitals of the Continent.

A pleasing feature associated with Dr. Forster's induction into office was the opening of a nurses' home in the remodeled residence formerly occupied by the medical superintendent, the new incumbent having been provided with quarters in the city pending the completion of the Whitby establishment. The accommodation which had been taken up by nurses was devoted to patients. The home, which has a capacity of 30 and is admirably adapted for the purpose, was opened on July 26, 1911.

The present capacity of Toronto Hospital is 1000, viz., 500 men and 500 women, while the population at the end of the last official year, October 31, 1914, was 1045, made up of 501 men and 544 women.

As the last days of the old Toronto Asylum approach it is felt that one of the most important of the Canadian insane institutions, historically, is about to disappear, and though this account but in-

¹ In Dr. Clarke's time the west wing of the Mercer Reformatory was emptied of some wayward girls, taken over by the Toronto Asylum, and a transfer made to it of 130 patients from the parent institution. It is used only for the cottage class of patients, and these, when the Whitby hospital is opened, will all be removed there.

dicates in a brief way some of the incidents of the good work it accomplished, none the less we say that its name will always have a prominent place in the history of psychiatry in Canada.

RECEPTION HOSPITAL.

TORONTO.

As has been recorded in the history of Toronto Asylum, the Ontario Government, inspired by Mr. W. J. Hanna, in 1907 sent a commission composed of the Hon. Dr. Willoughby, Dr. C. K. Clarke, and Dr. Edward Ryan abroad to study the psychiatric hospitals of the old world, particularly Germany, especial attention being given to the Munich Clinic under Professor Kraepelin and Professor Alzheimer. The findings of this committee are recorded in an elaborate and interesting report published in 1908. As a result of this publication the Provincial Legislature determined to erect a psychiatric clinic in Toronto. Architects were consulted and an appropriation of \$100,000 passed in order to make a commencement. The idea was to build this clinic in the neighborhood of the magnificent new Toronto General Hospital, in order that university students would find it easily accessible and so that an intimate connection between it and the hospital might be maintained. Everything pointed to a successful issue of this scheme. Difficulties arose, however, over a suitable site; petty jealousies developed among asylum men outside of Toronto, and a good deal of unfair and small-minded criticism was indulged in by those who did not understand the problem. Consequently Canada lost its opportunity to make the first really great advance in psychiatry in America. To the United States, therefore, goes a credit which should have been earned by Ontario.

In the meanwhile the population of Toronto was growing with phenomenal rapidity and the asylum was found to be totally inadequate to meet the demands for room. The gaol was rarely without 40 to 60 insane inmates, in spite of the fact that the law specially insisted that gaols should not be used for the detention of such persons. Even as long suffering and indifferent a public as that of Toronto eventually protested against the abuse, and, after several half-hearted efforts to remedy the evil had failed, Dr. R. W. Bruce Smith, inspector of hospitals, who had always

been a warm advocate of the psychiatric clinic, introduced an influential deputation of city officials and prominent citizens to the Hon. W. J. Hanna. This was done with the idea of finding temporary accommodation for such a clinic in part of the old Toronto General Hospital on Spruce Street, which had been vacated. The outcome of the interview was the establishment on July 9, 1914, of a reception hospital in what was formerly known as the gynæcological pavilion of that institution. This furnishes accommodation for 42 patients. It is really a clearing house, where the mental status of numerous patients brought to it is determined and the proper disposition of them made. It does away with the disgraceful gaol system and to a great extent accomplishes a good work. Dr. Harvey Clare, assistant superintendent of Toronto Asylum, who has had a broad psychiatric experience, was appointed medical director of this important branch.

KINGSTON ASYLUM.

Kingston Asylum, the official title of which is now "The Hospital for Insane, Kingston," although it is generally known as "Rockwood Hospital," was the second asylum born in the Province of Ontario.

In 1841 John S. Cartwright, Esq., member for Lennox and Addington in the first Parliament after the union of the Canadas, built for himself a fine stone mansion, with very handsome stables, also of stone, about 100 yards therefrom.¹ These structures were erected on the Cartwright estate known as "Rockwood," a tract of about 40 acres on the lake shore, a little to the west of the City of Kingston. In October, 1856, 33 acres of this estate, including the buildings, were purchased by the Crown as a site for a criminal lunatic asylum, the price paid being £5000. After the

¹ "Oh, would to God! that I were able
To build a house like Cartwright's stable.
It fills my heart with great remorse
To be worse housed than Cartwright's horse."

The above doggerel regarding these stables was current at the time of their erection. It has been ascribed to several, but was probably the extemporaneous production of a Colonel Jackson, who lived in a cottage on the Jackson estate directly east of Rockwood. This estate was subsequently added to the Rockwood property.

purchase had been completed, the stables were fitted up for the reception of 24 female patients, the male patients having been already located in the basement of the penitentiary. This substitute for an asylum was arranged with single rooms for 20 inmates, while a wooden addition made thereto comprised "four strong cells," a "keeper's room" and a dining room, beyond which again was a kitchen. The size of the single rooms was 9 feet by 5 feet. They were lighted by miserable little barred peep-holes, measuring only 18 inches by 12 inches. The entrance was on the west side, and a small hallway was used as an office. Dr. J. P. Litchfield, who had formerly been inspector of hospitals for South Australia, and later, medical superintendent of Walker Lunatic Asylum, had charge of the patients both here and at the penitentiary, his appointment dating from March, 1855. He had his private residence in the Cartwright mansion, where there also dwelt under his immediate supervision a well-to-do gentleman of unsound mind. Close by was a small stone cottage of still earlier construction, the home of one of the members of the Cartwright family, which at a later date was acquired by the hospital.

The three structures referred to are still in existence, and form parts of the present Kingston Asylum. The old stables have reverted to their original use; the small stone house is the north cottage, occupied by quiet female patients, and the new residence of the Cartwright family is the dwelling of the medical superintendent.

Three years after the opening of the institution, namely, September, 1859, the erection of the present asylum was begun. Like its progenitor, it was intended for insane criminals and dangerous lunatics only, as indicated by the following memorandum of the board of inspectors: "The Criminal Lunatic Asylum at Rockwood (which is the name given it by law) is destined to receive lunatics from the Provincial Penitentiary and lunatics who are dangerous, or reputed so to be. At present the male lunatics of this institution are located in a basement of the penitentiary buildings, and the females in an old building on the Rockwood property,"¹ that is, in the stable building already described.

From the provisions of the act constituting the institution²

¹ Report of the Board of Inspectors of Asylums, Prisons, etc., for 1860, p. 12.

² Consolidated Statutes of Canada, Chap. 109.

we find that the exact purpose of the establishment was the safe-keeping and treatment of the following classes of lunatics:

1. Convicts in the penitentiary becoming insane while under sentence there.
2. Certain classes of lunatics committed to jail as lunatics dangerous to be at large.
3. Persons charged with some offence of which they had been acquitted on the ground that they were insane at the time such offence was committed.
4. Persons indicted for any offence, and upon arraignment thereof found, by a jury specially impanelled for the purpose, to be insane.

The new building was planned by Mr. William Coverdale, architect, and erected chiefly by convict labor, under his superintendence, occupying over eight years in construction. The center building and east wing were the portions first built. In 1862 a part of the former was sufficiently advanced to admit of its being temporarily fitted up for the reception of 21 men, whose removal from the basement of the penitentiary greatly relieved the pressure there. On March 24, 1865, the building was formally opened by the transfer to it of the rest of the male patients. By the end of 1867 the west wing for women was virtually completed, although not opened until early in 1868, when the stable-asylum was vacated. The asylum was constructed of coursed cut stone from the penitentiary quarries. It comprised a central building four stories high with two wings, also of four stories, joined to the central block by connecting portions three stories in height, the total frontage being 310 feet. It was continued under the superintendence of Dr. Litchfield up to his death, December 18, 1868, when Dr. J. R. Dickson, surgeon of the penitentiary, and a graduate in medicine from the University of New York, who had been doing Dr. Litchfield's work during his illness, was appointed to the position.

Rockwood, as already stated, was intended for insane criminals and the criminal insane only, but the Toronto Asylum being full, friends, in their anxiety to have insane relatives placed in safe-keeping, perhaps also with the object of saving themselves the cost of transport to that institution, soon found a means to evade the law, which but inadequately safeguarded the real purpose of the

establishment. The process of evasion was simply to have the poor lunatic committed to jail as dangerous, whether really so or not. To prevent this abuse we find the inspectors, as early as 1862, recommending, in the following terms, that Rockwood should be used as a general as well as a criminal asylum:

The inspectors have to remark, with relation to Rockwood, that practically it has become an asylum for lunatics of every description from the eastern portion of Upper Canada, as the relatives of the parties, instead of obtaining the usual medical examination and certificate privately, in order to procure their admission into the provincial asylum at Toronto, which is at a great distance, procure their incarceration as dangerous lunatics in a common jail, from which they are transferred, under warrant of His Excellency, to the Rockwood institution. The board are inclined to recommend that regulations should be made authorizing their reception at Rockwood after the buildings shall have been completely finished, without obliging their relatives to resort to a previous imprisonment in a jail; to convert, in fact, Rockwood into a provincial asylum for the eastern counties of Upper Canada.¹

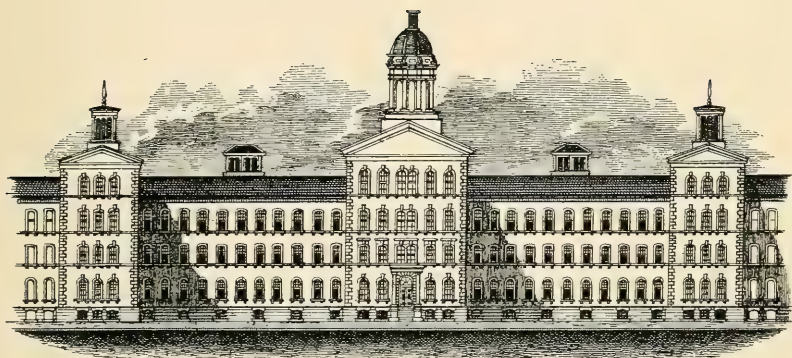
After the opening of the new institution they again recommended this course in even stronger terms. At the same time they advised that the old stable-asylum, which had been abandoned, should be converted into an establishment for female private patients, and the Cartwright mansion, used as the superintendent's residence, into one for male private patients, that officer to be given the north cottage to live in. These suggestions were never carried into effect.

At Confederation, the Board of Inspectors of Asylums, Prisons, etc., became the directors of penitentiaries, and the asylums and jails passed into the hands of the provincial government, with the exception of Rockwood, which, as a part of the penitentiary, remained under Dominion supervision.²

By this time lack of accommodation in the provincial asylum at Toronto had made it necessary, especially in the western district, to send many of the insane to the common jails for safe-keeping, where they soon became so numerous that it was absolutely requisite to take immediate steps to remedy the evil. Negotiations were accordingly entered into with the Dominion Government whereby, in 1868, the "Act Respecting a Lunatic Asylum for Criminal Convicts" was repealed, and arrangements

¹ Report of Board of Inspectors of Asylums, Prisons, etc., for 1862, p. 13.

² 31 Vict., Cap. 75.



ROCKWOOD HOSPITAL, KINGSTON, ONT., 1862.

concluded for the reception of 100 to 150 of these poor creatures into Rockwood asylum, it being distinctly understood with the authorities of that institution that all insane persons thus sent from the jails of the province would be kept entirely separate from the criminal portion of the population. The rate of maintenance was fixed at \$143 per annum, and permission was given the inspector of Ontario institutions to visit, unofficially, for the purpose of seeing the patients sent in and paid for by that province. This, as pointed out by the inspector, was practically the "farming out" system of maintaining lunatics, and that, too, without the supervision of the government paying for such maintenance.¹ To abrogate this the Legislative Assembly in 1871 adopted a resolution affirming the advisability of the province's acquiring Rockwood asylum, either by purchase or lease. A corresponding resolution passed the Dominion Parliament authorizing negotiations for its transfer to the province. It was not, however, until July 1, 1877, that the Ontario government took possession of Rockwood, purchasing the buildings and grounds for \$96,500. As soon as the property was handed over by the Dominion authorities, the insane convicts of unexpired sentence then in the asylum, 22 in number, were transferred to the penitentiary, where a special detached building has since been provided for this class of patients. Dr. Dickson, who had earnestly advocated the change, was retained as superintendent of the new provincial establishment, the name of which was changed from Rockwood Asylum to "The Asylum for Insane, Kingston."²

On the 1st of April, 1878, owing to the serious illness of Dr. Dickson, Dr. W. G. Metcalf, assistant superintendent at London Asylum, was transferred to Kingston as acting medical superintendent, his appointment being made permanent after the resignation of Dr. Dickson on the 31st of December following.

Dr. Metcalf was a man of great promise and had received from his mentor, Dr. Joseph Workman, the inspiration that came to every young man who was fortunate enough to live under his

¹ Report of Asylums, Prisons and Public Charities of Ontario for 1872, p. 28.

² One of the articles of agreement under which Rockwood passed into the hands of the provincial government was that it should continue to receive all convicts sent to the penitentiary from Ontario, if insane on the expiration of their sentences.

influence and instruction. The task at the Kingston Asylum was not an easy one, as the Rockwood traditions lingered for many years after the institution had been changed from a criminal asylum to a modern hospital for the insane. Dr. Dickson had done his work well, but, without adequate assistance and resources, could not accomplish the impossible. It was difficult to get away from the fact that the asylum had been a refuge for criminals. The walls of the corridors and rooms were white-washed, the wards were cheerless, the dining rooms devoid of proper linen and furnishings, restraint was far too common and conditions generally dispiriting. The building, however, had been very carefully and cleverly planned, and without doubt, even at the present day, Rockwood Hospital is by far the best arranged of any of the public asylums in Ontario. The grounds which had been thoughtfully developed by Dr. Dickson had wonderful possibilities, and, as the Cartwright and Sampson families had preserved the natural beauties of this paradise, it was not difficult to develop the situation to the ideal standpoint. Dr. Metcalf at first labored under great disadvantages; the staff was small, and he had nearly the whole of the responsibility of management on his shoulders, both in the executive and medical departments. He energetically undertook many improvements though, and when Dr. C. K. Clarke was sent to him as an assistant in March, 1882, the way was clear to advance rapidly. These men were old friends, who had been trained in the same psychiatric school; both were possessed of unlimited enthusiasm and determined to make the hospital a credit to the province. The object lessons in the way of the evils of restraint were only too apparent at Rockwood and the old cells in the attic and basement were landmarks that were an unpleasant reminder of evil days. At this time, too, Dr. Bucke was carrying on his non-restraint crusade and Dr. Metcalf, although not convinced, felt that at least a fair trial of the system should be made. Against the strenuous opposition of the nurses and attendants, restraint was gradually abolished and never again during either Dr. Metcalf's or Dr. Clarke's reign was it used in Rockwood Hospital.¹

¹ Dr. Metcalf, on his advent to Kingston Asylum, had found restraint so largely employed that the number of cases represented nearly 10 per cent of the entire population. *Vide* Report of Asylums, Prisons and Public Charities for 1878, p. 39.

Dr. Metcalf was a wise and cautious administrator and planned many reforms in management, and when he came to his untimely end had succeeded in placing his institution on a sound and healthy basis.

On August 12, 1885, his assistant, Dr. C. K. Clarke, determined not to be under the necessity of asking for advancement through political influence, placed his resignation in Dr. Metcalf's hands, with the intention of beginning practice in Hamilton. This resignation was forwarded to Toronto, covered by the last official letter written by Dr. Metcalf. On the following day Drs. Metcalf and Clarke were making their rounds and while passing through one of the buildings were suddenly attacked by Patrick Maloney, a tramp who had been committed to the institution a few months before. He was supposed to be harmless, but as a matter of fact was full of paranoid ideas of persecution. Maloney had improvised a formidable knife and as Dr. Metcalf happened to be nearest him he received the brunt of the first attack and was fatally stabbed. Maloney endeavored to kill Dr. Clarke also, but proved unequal to the task. Dr. Metcalf lingered in great pain for three days, but never rallied from the shock and died on August 16, 1885. His loss to the service was a serious one, as for the first time in the history of the province an assistant had been promoted from the ranks and was proving that this method was the proper one for the government to adopt. Dr. Metcalf was a man who was maturing slowly but steadily, and there can be no doubt that his ideals would have led him to a brilliant success had he been spared.

The Kingston tragedy made a great impression on the public. For the moment politics were forgotten, and Dr. Clarke, who had resigned the position of assistant, as has already been stated, was at once offered the superintendency. This was a most unusual proceeding, since political preferment was the rule and the new nominee to office was bitterly opposed to all such advancement. Dr. Clarke's ambitions led him in the other direction, but the tragic conditions surrounding Dr. Metcalf's death, and the fact that the institution would be without an officer who knew the patients and the details of the work, determined him in accepting the position offered. The circumstances were out of the ordinary and he felt in honor bound to stand by the ship at the particular moment.

When Dr. Clarke assumed charge of Rockwood he brought all the enthusiasm of youth and an optimistic disposition to bear on the situation, and, after a visit to Pontiac Asylum in Michigan, which impressed him greatly, proceeded quietly to place the institution on the most modern footing possible. Recognizing the fact that non-restraint could only be accomplished by intelligent means, he instituted industries of all kinds, such as coir mat making, brush making, broom making and many other innovations of this kind; indeed for a time the Rockwood Hospital led in such things. Of course the Knights of Labor complained bitterly of the competition, with the result that the politicians interfered and some of the thriving industries were destroyed. However, it had been fairly demonstrated that occupation was the inevitable accompaniment of non-restraint, and all sorts of ambitious schemes were forwarded. Airing courts were done away with, the walls torn down and all jail-like conditions changed. This was very necessary in Rockwood, as the criminal asylum traditions lingered in spite of all efforts to destroy them. Then again the warrant system, an abomination at the best, persisted in the East. The great majority of patients came through the gaols and the physicians and people of the district were wedded to it, as it saved them an infinite amount of trouble and was a cheap and easy method of transferring private burdens to the broad back of the state. The new superintendent took a firm stand against the abuse of the warrant system and eventually succeeded in having it largely done away with.

By November, 1885, the hospital had become so overcrowded that a large, old stone building in the City of Kingston, originally erected as a Roman Catholic seminary and known as Regiopolis College, was rented, renovated and occupied by 150 patients of the chronic class, quiet and harmless. It remained in use until February, 1891, when the opening of a new institution at Mimico allowed it to be dispensed with.¹

In 1885-86 an addition was made to the rear extension of the main asylum. This provided beds for 65 patients, and in it was located a new amusement hall, 72 x 42 feet, christened "O'Reilly Hall" in honor of the then inspector, Dr. W. T. O'Reilly.

¹ At the present date this building, after being extensively added to, is used as a hospital, and called "The Hotel Dieu."

In 1896 another addition for men was made to the east wing of the main building, and a similar addition to the west wing for women was asked for by Dr. Clarke.¹ The latter, however, has never been made.

The superintendency of Dr. Clarke was marked by great progress. A separate hospital, "Beechgrove," properly equipped and furnished for individual treatment, was put up, largely through the efforts of the patients, who quarried all of the stone and did practically all of the labor in connection with its erection. This was a part of an ambitious scheme to train nurses, and the Rockwood school was one of the first group of seven established in America. The result of the training school methods was immediately apparent; women of high type undertook the training and the transition in the wards was most striking. The superintendent had always opposed the so-called refractory wards and insisted that the majority of patients could be induced to conduct themselves with some degree of propriety if surrounded by comforts and humanizing influences. He objected, too, to the crowding of large numbers of patients in sitting rooms, where, for want of occupation, they became so many automata rather than human beings. The spirit of scientific investigation was inculcated in the staff and the hospital idea carefully developed in every direction. Rockwood became the center of inspiration for advancement in psychiatry and easily ranked as the most progressive and successful of all the Ontario institutions. Of course the ambitions of the superintendent were opposed by the politicians, but he was more generously treated than most of his confreres, and when he removed to Toronto in 1905 Rockwood Hospital had achieved a most enviable reputation. A beautiful nurses' home, "Leahurst," had been built;² tuberculous patients were treated in isolated pavilions; a cottage for convalescing patients known as "The Cedars" had been erected, and altogether Rockwood had reached a promising point in development.³

¹ The original building was designed with a view to the extension of the wings then erected.

² "Leahurst" was opened by the Hon. J. R. Stratton, Provincial Secretary, on June 29, 1904. It has accommodation for 50 nurses.

³ The "Cedars" is a summer cottage, used only in fine weather, for patients taken from the wards of the institution. It was opened on September 10, 1905.

When Dr. Clarke left in October, 1905, to take over the superintendency of the Toronto Hospital for the Insane he was succeeded by Dr. Edward Ryan, a well-known Kingston surgeon. Luckily, Dr. Ryan, although without experience in psychiatry, was careful to recognize the "Rockwood spirit" and wisely determined to keep the scientific side of the work in the foreground just as his predecessor had done.

A visit to the psychiatric clinics of Europe¹ gave a new zest to his studies and he very properly reached the conclusion that the modern hospital for the insane demanded something more than a superintendent's devotion to the raising of mammoth turnips and thoroughbred Holsteins. As a result, under his progressive management Rockwood has developed and probably ranks first among the Ontario hospitals for the insane, both in scientific spirit, equipment and efficiency. The Hon. W. J. Hanna, Provincial Secretary, has taken a particular interest in this hospital and is keenly alive to the fact that the scientific spirit must be kept alive if institutions are to succeed in doing the work for which they are designed.

Since Dr. Ryan's advent the major structural improvements made have been the opening, in 1907, of an industrial building, containing on the first floor a tailor shop, a shoe shop, and a brush and mattress shop, and on the second floor a women's sewing and tailoring room; and an addition to Beechgrove, made in 1914. This provides an autopsy room in the basement and an operating suite on the main floor; both rooms are especially designed for teaching purposes, and provide seating accommodation for 70 students.

Rockwood as now constituted comprises, in addition to the main building, an infirmary, "Beechgrove," with a capacity of 15 beds; "North Cottage," with 23 beds; "South Cottage," with 64 beds; and "Newcourt," a structure known as the "Wilson House" at the time the seat of government was in Kingston, with 31 beds. The total capacity of the institution is 600, and its present population 571. It receives patients from the counties of Durham, Northumberland, Hastings, Lennox and Addington, Prince Edward, Frontenac and Renfrew. The original area of the farm has also been increased by purchase to 187 acres.

¹ *Vide* sketches of the Toronto Asylum and the Reception Hospital, Toronto.

LONDON ASYLUM.

London Asylum, the third in point of seniority of the existent Ontario institutions, is based on the old makeshift Malden Asylum, originally opened in 1859 as a branch of Toronto Asylum, but made an independent establishment in 1861.¹

After confederation of the provinces on July 1, 1867, the asylums, with the jails and other public institutions, came under the control of the local legislatures, in conformity with the ninth section of the "British North America Act," and, in 1868, Ontario adopted the present system of direct governmental supervision, through an inspector appointed for that purpose.

The first inspector under the new regulation, known as the "Prison and Asylum Inspection Act," was J. W. Langmuir, Esq., a man of great energy and extraordinary business capabilities, who did much to place the asylum system on a practical, business-like basis.

In his first report² we find Mr. Langmuir urging upon the government the pressing need of increased accommodation for the insane, especially in the western part of the province. The urgency of the case was recognized by the Legislature, which, in 1869, made an appropriation of \$100,000 toward the erection of a new asylum, work upon which was begun immediately. London, as most central to the population it was intended to benefit, was selected as the location of the proposed structure, and 300 acres of good, arable land were purchased on the north side of the Governor's Road, about two miles east of that city.

In construction, white brick was the material chosen, and the *echelon* plan of arrangement was adopted. The edifice, when completed, consisted of a center building four stories high, the wings extending from the same being three stories, and the receding wings two stories. The whole length of the building was 610 feet and its capacity 500 beds, while the cost of the structure, including furnishings, was about \$397,000.

The institution was ready for the reception of patients November 18, 1870, on which date the inmates of the Orillia branch asylum, 119 in number, arrived. They were followed on the 23d

¹ *Vide* Toronto Asylum and its branches.

² Report of Asylums, Prisons and Public Charities of Ontario, 1867-68, p. 26.

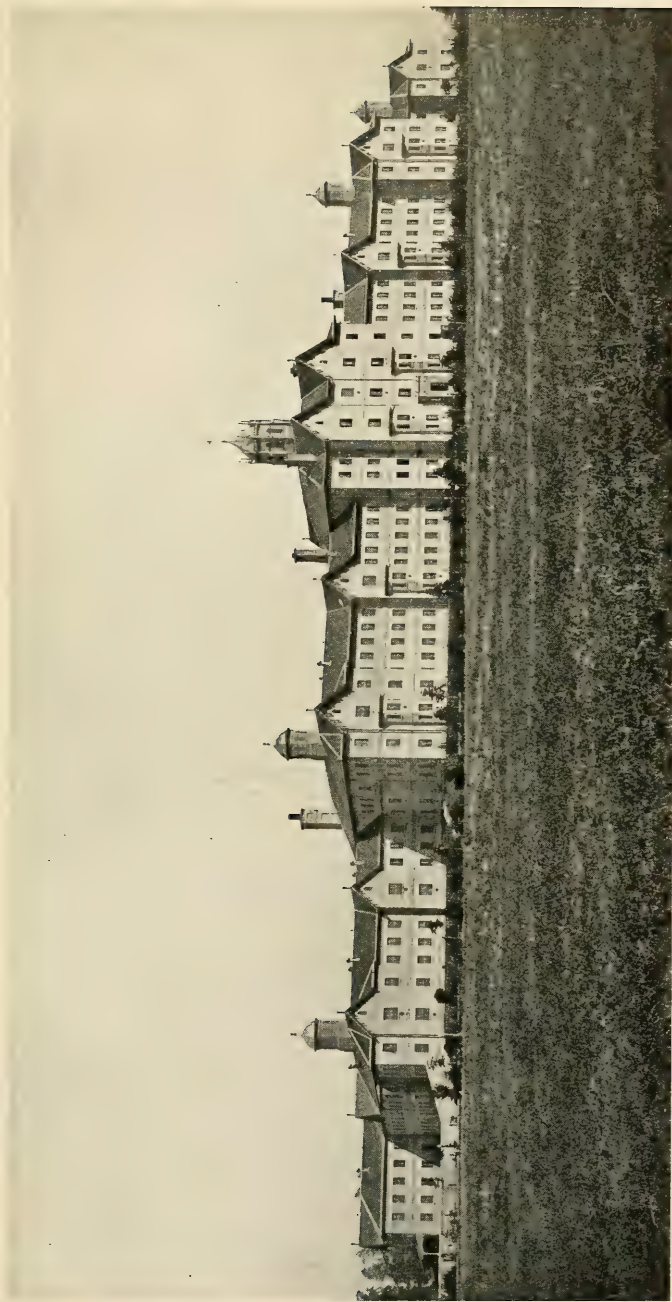
by those of Malden, numbering 244. These supply depots were closed upon the departure of their occupants. Dr. Henry Landor, superintendent at Malden, took charge of the new establishment.

London Asylum was enlarged in 1872 by the creation of a department for idiots, which was entirely isolated from the main asylum, but under its management and control. This structure, though insignificant in itself, being capable of housing but 38 inmates, is yet of considerable interest, having been the first building erected in the province for the reception and care of defectives only. Within two months after its opening this substitute idiot asylum was filled, showing the urgent need for such an establishment.

In 1874 the capacity of London Asylum was still further augmented by the erection of a cottage for the reception of 60 quiet, working patients—30 men and 30 women—at a cost of about \$23,000. This cottage, made as home-like as possible, both in external appearance and domestic arrangements, was supplemented, in 1877, by the construction of two others, each of the same capacity and on similar lines. These were opened in 1878.

The year 1877 was a sorrowful one for the asylum at London, witnessing, as it did, on January 6 the death of its first superintendent, Dr. Landor, a man of great intellectual ability, and one holding advanced opinions in regard to the treatment of insanity and the administration of institution affairs.

Happily a worthy successor was found for him in Dr. Richard Maurice Bucke, a graduate of McGill University, Montreal, and at that time in charge of the recently created Hamilton Asylum. Dr. Bucke assumed the superintendentship February 15, 1877, and filled the office with great credit to himself and benefit to the institution up to the date of his sudden and untimely death on February 19, 1902. To him is due the introduction into Canada, in 1883, of the non-restraint system, which is now the accepted principle in the treatment of the insane throughout the Ontario institutions. This fact is of special interest, as at that time nearly all American asylum officials regarded the doctrine of non-restraint as purely Utopian. On the outcome of his new move, after a four years' trial, Dr. O'Reilly, Inspector of Asylums, gave Dr. Bucke the following well merited praise.



LONDON ASYLUM FROM THE SOUTH, 1877.

To Dr. R. M. Bucke, medical superintendent of the London Asylum, belongs the honor of being the first to take up the subject practically in the Canadian asylums. He approached it at first very properly with great hesitation and caution, but it only required a few weeks' practical study of the subject to convince him that all that had been said by the advocates of the system was well founded, and restraint in the London asylum became a thing of the past. Dr. Bucke did not burn his restraint apparatus with religious ceremonies, nor make any flourish of trumpets about it. When the proper time came he simply announced that after 18 months' trial of absolute non-restraint in an asylum having a population of 900 patients, he had found the system to be all that had been claimed for it, and that he was now unable to conceive of a case where mechanical restraint, except for surgical reasons, was necessary, was not positively harmful to the patient. Dr. Bucke's example was slowly followed by others, until now in this province restraint appliances are unknown, and one after another the doctors give in their testimony to the great value of this reform, which was commenced by Conolly and Pinel half a century ago.¹

Another important reform in the London Asylum management inaugurated by Dr. Bucke was the discontinuance of the use of beer, wine and spirits, which Dr. Landor, following the old English custom, had allowed to many patients as a beverage.

Of structural improvements made in the time of Dr. Bucke, the first was the enlargement of the establishment by the reconstruction of the idiot branch, from which the patients had been removed to the new idiot asylum at Orillia. Extensive wings added to the original structure raised its capacity to 183 beds. As rebuilt it was expressly designed to accommodate troublesome patients, and was opened in 1879.

In 1883 the erection of an outside chapel, with a seating capacity of 450, was begun. This had been asked for by Dr. Bucke for several years, and was opened in 1885. It was a handsome structure, arranged to accommodate both Protestant and Roman Catholic worshippers. A central alcove at the rear, flanked on each side by a vestry room, contained an altar for the latter denomination. By sliding doors this alcove and altar were cut off from the body of the church when in use for Protestant services.

In December, 1887, the hospital laundry and kitchen were destroyed by fire. In reconstruction, advantage was taken of the opportunity to secure a new amusement hall, situated over the new laundry and kitchen, to replace the old one, which was located in

¹ Report of Asylums, Prisons and Public Charities of Ontario, 1887, p. 36.

the fourth story of the main building, where it was difficult of access and a source of danger to life in case of a fire occurring when the hall was in use. At the same time the old hall was converted into an infirmary of two wards, containing beds for 40 patients, 20 of each sex.

In the selection of the asylum site insufficient attention had been given to facilities for the disposal of sewage. Without going to the River Thames, a distance of some three miles, the only natural outlet for drains was a small neighboring creek. This soon became so polluted as to be a nuisance and detriment to the parties living along or near its banks, and an outcry was raised against the continued contamination. The result was that the government was obliged to install a filtration plant, by means of which only clear water was allowed to escape into the creek. After a prolonged trial, however, it was found impossible to prevent the filter choking up, and its use had eventually to be abandoned. In the course of the year 1889 another plan of sewage disposal was adopted, known as the "intermittent downward and filtration system." The work was conducted under the supervision of Col. George E. Waring, the eminent sanitary engineer of Newport, R. I. Briefly stated, the system consists of running the sewage into level trenches, made side by side in a piece of ground especially graded for the purpose, from which it filters into the soil. Within a few hours from the time it is pumped into the trenches it has sunk into the soil and disappeared. Only a fourth or fifth part of the trenches are used each day, so that each trench, after being used, lies four or five days unused. Between the trenches are long, narrow beds, splendidly adapted for the growth of garden truck.¹

Dr. Bucke had been urgent in his appeals for a separate infirmary to replace the makeshift one into which the old amusement hall in the main building had been converted, and which, notwithstanding its inadequacy to meet the requirements of mod-

¹ Up to the time of his death, Dr. Bucke was enthusiastic in his praise of the new system, and year by year added to the size of the sewage farm, which, originally consisting of four, now has an area of some 20 acres. During the year 1901 32,000,000 gallons of sewage were thrown into the trenches. It continues to give good satisfaction as regards profit from crops, and there is no malodor from the ground irrigated with sewage.

ern surgery, had done good service. The amount of surgery, especially gynecological, being done at the asylum had made this almost an absolute necessity. Such a structure had been long promised and long delayed, but, in 1900, the doctor's plea was at last met, and excavation for the foundation of the new building, which was arranged to have a capacity of 60, was begun on July 3 of that year. The work was completed and the structure opened in the autumn of 1904.¹

In 1908 this infirmary was enlarged and adapted to the dual purpose of a reception hospital, as well as one for the special care of medical and surgical cases. Dr. Robinson, the then and present superintendent of the asylum, states that only a small part of the original structure was occupied by the latter classes of patients, and it had gradually become filled with chronic, feeble inmates. The removal of these to other suitable wards was accomplished early in the year, since which time every newly admitted patient has been placed in the reception hospital, where had been installed a complete system of hydrotherapeutic appliances. A staff of 18 nurses, or an average of one to about every four patients, was provided. In his 1910 report on this subject, Dr. Robinson writes as follows:

This still continues to be the most important feature of our work. All patients are admitted to this hospital, where they remain for a greater or less period of time. Many cases remain until they are able to go home, and are never placed among the chronic patients in other parts of the institution. The great aim is to conduct the place like an ordinary general hospital. . . . Although our reception hospital has only been in operation two full years, much too short a period from which to draw any general conclusion, the sudden increase in the percentage of discharges during that time has been very marked.²

During the early part of the year 1902 death deprived America of one of its ablest alienists in the person of Dr. R. M. Bucke, who was succeeded by Dr. G. A. MacCallum, an 1860 graduate of Victoria University. Dr. MacCullum assumed charge of the hospital on March 3 and during his first year in office inaugurated

¹ This infirmary was a well-built modern structure, which cost upwards of \$100,000, having among other features a well-equipped operating room.

² Forty-third Annual Report of the Inspector of Prisons and Public Charities upon the Hospitals for the Insane of the Province of Ontario, being for the year ending 31st October, 1910, p. 56.

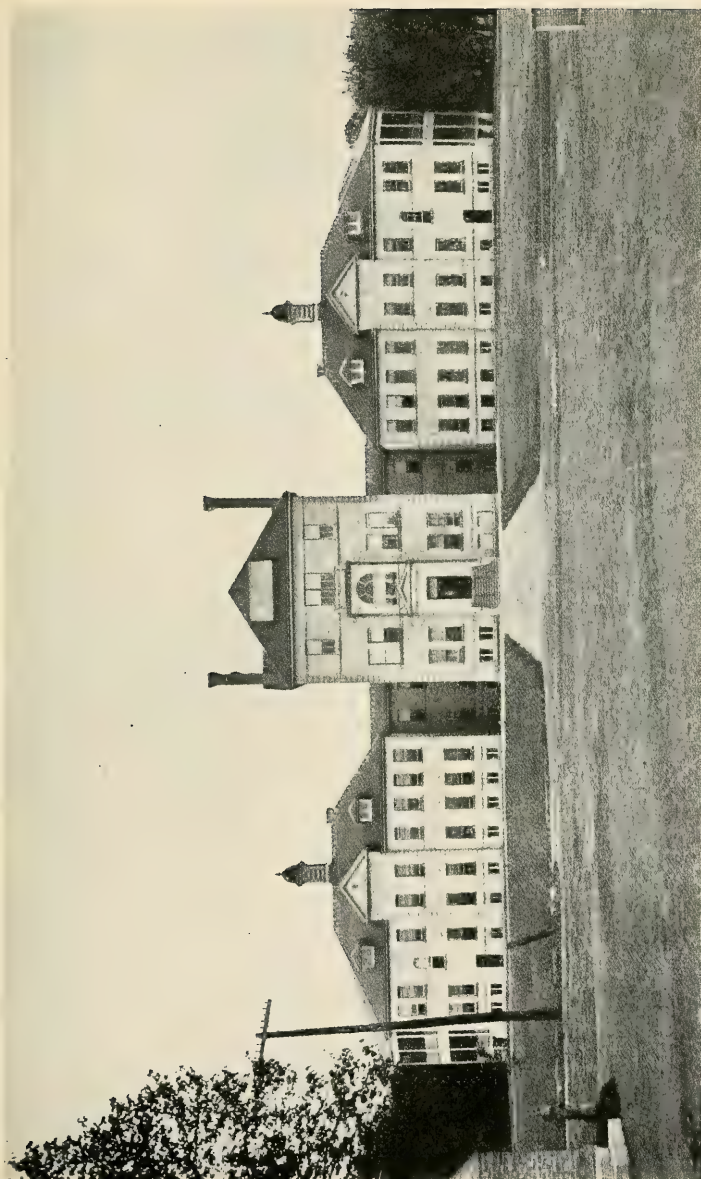
a training school for nurses and advocated the building of a nurses' home. He also urged upon the government that steps should be taken to found a general pathological laboratory in connection with the asylum system of the province. The former of his requests was in part met by the conversion, in 1905, of the large center building of the infirmary into a residence for 28 nurses, who, as the doctor states, "were formerly at work on the worst halls and from which they had formerly to retire for the night in rooms just off the halls, so that they were really in the noise and worry and bad air of these halls during the greater part of the 24 hours, and consequently very frequently ill and off duty. All parties concerned are very much pleased with the change, the institution gets better service from the nurses and they are in much better health and can do their work with greater comfort and vigor."¹

The asylum property, which originally consisted of 300 acres, but which had been slightly curtailed by the passage of the Canadian Pacific and Grand Trunk railways across it, was augmented, in 1905, by the purchase of a plot of land lying immediately to the north, known as the "Trebilcock Farm." This comprised 235 acres, and by its acquirement the hospital became possessed of a block of 527 acres.

In January, 1908, Dr. W. J. Robinson, of Guelph, Ont., a graduate of the University of Toronto, in 1883, was appointed to the superintendency of the establishment on the transfer of Dr. MacCallum to the charge of the Penetanguishene Hospital. Since his accession, in addition to the formation of the reception hospital, the major improvements effected have been the construction, in 1910, of a fine skating and curling rink, 200 feet by 65 feet, and the installation, in 1912, of electric light to replace the gas formerly in use.

On the second day of January, 1912, another fire occurred in the same part of the institution as that which had met with disaster in 1887. It completely destroyed the kitchen, bakery, and the amusement hall situated overhead. A new kitchen, bakery and

¹ Thirty-eighth Annual Report of the Inspector of Prisons and Public Charities upon the Lunatic and Idiot Asylums of the Province of Ontario, being for the year ending 30th September, 1905.



HOSPITAL BUILDING, LONDON ASYLUM, 1913.

cannery¹ were built during the same year, while a new amusement hall is now in course of construction, and is expected to be completed in a few months. The latter structure will provide a splendid room for dancing, concerts, lectures, moving pictures, etc. In addition, it will contain club rooms for male and female employees. These will be fitted up with billiard tables, bowling alley, shooting gallery, shower baths, swimming pool and other attractive means of recreation.

The total capacity of the institution is set down as 1066, but the population at the close of the official year 1914 was 1130, viz., 535 men and 595 women.²

HAMILTON ASYLUM.

Hamilton Asylum, now Hospital for the Insane, Hamilton, found its origin in an effort on the part of the temperance advocates of the province to provide a place of detention for inebriates.

At the session of the Legislative Assembly in 1867-68 a petition presented by the Congregational Union of Canada for the establishment of an asylum for inebriates was referred to a Parliamentary committee.³ Nothing, however, was done in the matter, and between July, 1872, and February, 1873, some 50 petitions to the same effect as the original, and signed by residents from all parts of the province, were presented. In compliance with these, backed by personal appeals of delegations from all sections of the community, it was decided by the government to procure a site and commence the erection of a building in the vicinity of Hamilton.

Of sites proposed, the two finding most favor were one on the brow of the escarpment⁴ overlooking the city of Hamilton, the charming Dundas Valley and Burlington Bay, above which it

¹ The cannery is a recent innovation, which from small beginnings has grown to such an extent that it is able to preserve all the surplus tomatoes, corn, pears, apples, plums and other fruits produced in the very extensive and fertile gardens of the hospital.

² *Vide* letter from Dr. Robinson, dated June 5, 1915.

³ *Vide* general index of journals and sessional papers of the Legislative Assembly of Ontario, 1867-8 to 1888.

⁴ This escarpment is commonly designated by Hamiltonians the "Mountain."

risers some 300 feet; the other a property on the lower level in East Hamilton. Joseph Rymal, Esq., M. P., and James Williams, Esq., M. P. P., then members of the federal and local legislatures, respectively, strongly urged the selection of the former, and fortunately their wishes prevailed. The wisdom of the choice has been amply demonstrated, as it is one of the most delightfully situated and healthful localities in the province.

The first property, comprising about 100 acres, was purchased for \$22,400 from Mr. Isaac Buchanan, ex-M. P., Messrs. Moore and Davis, and a Mrs. Gourlay. Upon this was erected, according to plans prepared by Mr. Kauffman, Provincial Architect, a three-story brick building with coursed stone basement and mansard roof, suitable for the accommodation of 200 patients and necessary staff. It was ready for occupancy in the fall of 1875. The material employed in construction, above the basement, was red brick, with white brick and stone trimmings.

Notwithstanding the opportunity thus afforded for the detention of inebriates, it was not taken advantage of as had been expected. Meanwhile the jails and a number of private houses contained many insane persons who needed accommodation, and the repeated appeals of the inspector of asylums, Mr. J. W. Langmuir, to the effect that the needs of lunatics were far more pressing than those of dipsomaniacs, were acceded to. The building was consequently devoted to the care of the insane.

On March 17, 1876, the date of opening for the reception of chronic cases only, 210 patients were transferred from the Toronto, Kingston and London asylums. The institution was originally placed in charge of Dr. Richard M. Bucke, a general practitioner of Sarnia, Ont., who, on his being sent to the London Asylum, in the following year, was succeeded by Dr. J. M. Wallace, February 14, 1877, superintendent of the idiot asylum at Orillia, Ont. With Dr. Bucke were associated Dr. T. S. Covernton, of Toronto Asylum, as assistant superintendent, and Mr. Bidwell Way, of Picton, Ont., as bursar.

The land that had been acquired was a common, very rough and rocky but well wooded in parts, and much labor had to be expended in levelling, removing stumps and constructing roadways and necessary fences.

During the next year, *i. e.*, 1878, it was decided to enlarge the building, and wings were added to both the east and west sides, while an addition, in rear of the center, was erected to provide a congregate dining room on the lower floor, and rooms for staff and an amusement hall on the two upper floors. These wings, which were completed and opened March 15, 1879, recede from the front line of the main building, and are two stories in height, with basement and mansard roof. The transverse connecting portions between the wings and central structure are of the same height as the latter, the entire length of the building being about 550 feet. When enlarged by the construction of these wings, a group of eight counties was assigned to the hospital, to which acute cases were then admitted.

In June of the same year, owing to the overcrowded condition of the Asylum for Idiots at Orillia, while many patients of this class were being detained in the jails, instructions were given to fit up the basements of the new additions for temporary occupancy by these, and 27 imbeciles were removed thereto on July 27.¹

Also during this year (1879) the unsatisfactory system for the disposal of sewage, by its collection and treatment in tanks blasted out of the rock immediately in front of the main building, was abandoned. As a substitute an 18-inch glazed tile pipe was laid down the face of the mountain, to connect with the city service, an agreement being made with the corporation that the sum then paid was to provide for all time to come for the disposal of the asylum sewage. Coincident with the settlement of the sewage problem a much-needed change was made in the water-supply system. From the time of the erection of the first building water had had to be procured from the city, all attempts, by putting down artesian wells, failing to give an adequate amount. The city supply, however, was unsatisfactory, owing to the elevation of the institution above the lake. As a result, a special pumping-station, the property of the hospital, was built at the corner of Queen and Markland streets, about half a mile distant and 120 feet below the building.

¹ Additions to the Orillia establishment having been completed in September, 1882, all idiots then in the Hamilton institution, to the number of 75, were transferred thither.

Access to the institution being somewhat roundabout, a flight of 262 wooden steps was constructed, in 1881, leading from the front of the main building to Queen Street. Their completion made much more easy the three or four daily trips of the engineer to the pumping station, and provided a shorter road to the western portion of the city for other employees and the friends of patients.

In 1884 the erection of a reception hospital, where acute cases could be received and treated apart from the more chronic and demented population, was urged and an appropriation granted for the purpose. Consequently, what is known as "East House" was completed to give housing for 80 men, the purpose being to erect a counterpart the following year for women. Though the building, opened November 1, 1884, was, and in fact now is, quite suitable for the purpose for which it was designed, the original plan was not carried out, and subsequently, in 1890, the government set the building aside for the detention of the criminal insane of the province.

In 1885 plans, modelled after the hospital at Middletown, Conn., were prepared for a three-story building, with basement, to accommodate 300 patients, and the erection of "Orchard House," with a dining room for each hall instead of the associate dining room of the main building, was begun. It was not, however, completed until 1888, being opened on January 24 of that year, when the then inspector, Dr. W. T. O'Reilly, pronounced it without exception the best asylum building in the province.

On Sunday, October 31, 1886, a serious fire endangered for a time the whole institution. Fortunately it was unattended by loss of life, though the night attendants, then in their rooms, had narrow escapes. The outbreak began in the drying room of the laundry, being apparently caused by a patient who had taken refuge there to have a quiet, uninterrupted smoke. The portions of the building destroyed were the laundry, the kitchen, an associate dining room for 350 patients, the amusement hall with its stage and scenery, the bakery, and the sleeping apartments of the night watches and servants of the institution. With the aid of the Hamilton fire brigade and a body of the 13th Regiment, under command of Lt.-Col. J. M. Gibson, M. P. P. (afterwards Lieutenant-Governor of the province), the flames were subdued before they destroyed the wards and central administrative section of the



MAIN BUILDING, HAMILTON, 1915.

main building. In reconstruction the precaution was taken to place between the laundry and the kitchen, etc., a heavy fire wall. The cost of repairs amounted to over \$60,000.

Early in 1887, owing to continued ill health, Dr. Wallace resigned the superintendency, and in May following Dr. J. W. Montgomery, the assistant superintendent, who had been in the service of the province since 1877, died suddenly from cerebral apoplexy. Dr. James Russell, a practising physician of Binbrook, Wentworth County, Ont., was appointed to the position made vacant by the retirement of Dr. Wallace, and assumed duty August 31 of that year.

In 1891 contracts were let for the erection of a large reservoir, capable of holding 200,000 gallons of water, a fire hall and a hose tower, the work being completed by the fall of 1892. In the fire hall, in addition to the hose reels, ladder trucks, etc., was placed a powerful steam pump, connected to the reservoir and fire mains, whereby a pressure of 200 pounds could almost immediately be exerted.

During the years 1893 and 1898 further additions were made to the establishment. In the former, sections were added in rear of each of the main building wings for the provision of well-lighted, segregate dining rooms with adjacent sculleries, etc., to replace the associate dining room heretofore in use; in the latter year, an infirmary, in which was located an excellent operating room, modernly equipped, was completed with a capacity of 40 beds.

In 1900 electric lighting was introduced into all the buildings and residences to replace the gas previously in use, while in 1904 a skating rink, 150 x 64 feet, was constructed.¹

Dr. Russell having resigned the superintendency, after 20 years' service, in May, 1907, was succeeded in office June 1, by Dr. Walter M. English, of London, Ont., for some ten years previous professor of public health in the medical department of the Western University, located in that city. Though no important structural changes have been wrought since Dr. English's assumption of the reins of government, nevertheless the Hamilton Hos-

¹In 1908 this rink was increased in size by the addition of a section, 150 x 20 feet, thus providing ample space for both skating and curling.

pital has continued to press quietly forward in its good work, and to keep abreast with other kindred institutions in the province.

On August 1, 1911, a serious fire, supposed to be due to defective electric wiring, broke out in the upper story on the male side of the main building. Unfortunately, the conflagration resulted not only in the loss of property, a minor consideration, but in causing the deaths, before they could be removed, of nine elderly demented residents in the flat. The repairs, which cost about \$18,000, gave opportunity to make several much-needed improvements.

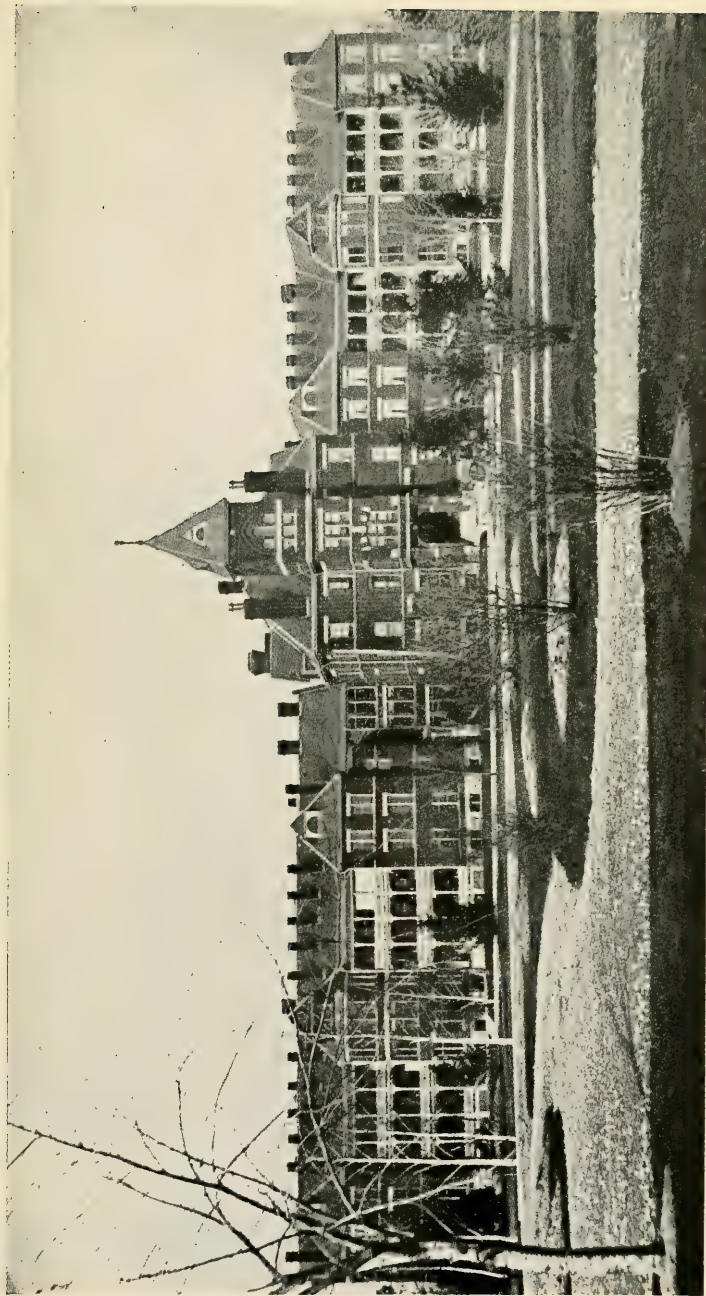
On November 1, 1913, the provincial hydroelectric system was connected with the hospital, and the steam pumps previously in use abandoned, except for emergencies, electricity being employed in place thereof.

The original property purchased for the institution was soon found insufficient for garden and farm purposes. In consequence, from time to time additions to it were made. Thus in 1888, 95 acres more were bought; while, in 1890, the "Andrews Homestead" and eight acres of land, on which stood a large, double brick house, occupied by the gardener and farmer, and for which the hospital had for years been paying rental, was acquired at a cost of \$8000. In 1897 another addition of 50 acres was made by purchase and exchange from a Mr. Beckett. In 1903 "Boulderwood," the summer chalet of Mr. B. E. Charlton, with its beautiful gardens and lawn, comprising 11 acres, lying between the hospital entrance driveway and the mountain brow, was secured;¹ and in 1909 "Hickory Farm," consisting of 176 acres of excellent farm land, was obtained at the price of \$15,000.² This last purchase leaves the total property area of the hospital at 529 acres.

The total capacity of the hospital now is 1295, while 1312 patients were in residence at the close of 1914. It has as feeders the counties of Halton, Wentworth, Welland, Lincoln, Haldimand, Norfolk, Brant, Wellington, Waterloo, Dufferin and Grey.

¹ In 1908 this chalet was moved to a spot adjacent to the infirmary and utilized in the construction of a harborage for 30 tuberculous patients, its well-lighted rooms and broad verandas fitting it admirably for the purpose.

² The old farm house on this property has been remodelled, brick veneered and a second story added, thus giving accommodation for 36 patients of a privileged class with the requisite staff.



ORCHARD HOUSE, HAMILTON, 1915.

MIMICO ASYLUM.

Mimico Asylum¹ is located on the shore of Lake Ontario, about four or five miles beyond the western limits of the City of Toronto and two miles from the village of Mimico, whence it takes its name.

For some years previous to 1890 the question of how to take care of the chronic insane most economically and at the same time most efficiently had seriously engaged the attention of the Ontario Legislature, and the government, carrying into effect the views of leading philanthropists, decided to try the experiment of equipping a new asylum solely for the chronic insane, who were to be transferred to it from other provincial asylums where the accommodation had become insufficient. As it was then designed to remove this class of cases from all the larger asylums in the province, it was necessary to select a site which, considered geographically, would be central as far as these institutions were concerned. On this account as well as for sanitary reasons this healthful and beautiful situation was selected.

The administration of the establishment was to be directed from the Toronto Asylum, of which it was to be regarded as a branch, known as the "Mimico Branch Asylum." It was so conducted from its opening, January 20, 1890, when the first patients were transferred from Toronto Asylum, up to November, 1894. At the latter date, copying the example set by the State of New York as regarded their hospitals at Willard and Binghamton, it was decided by the government to be neither wise nor just that a large body of the insane should be branded as hopelessly incurable and herded by themselves, when experience showed that while the chances of restoration to reason certainly lessened with the continuance of the disease, it was none the less true that recovery might possibly occur at any time.

Acting upon this righteous and humane conclusion, the Mimico branch was transformed into an independent institution, and had a territory assigned to it from which to receive patients direct.

¹ By an act of the Legislature the name of asylum was abandoned in the case of all institutions for the care of the insane, the term hospital being substituted therefor. The official title of the Mimico establishment thus became "Hospital for the Insane, Mimico." *Vide* Revised Statutes of Ontario, 1914, Chap. 295.

This territory comprised the counties of Peel, Simcoe, Ontario, Victoria and Peterboro, and the districts of Muskoka, Parry Sound, Nippissing, Algoma, Thunder Bay and Rainy River.

In construction the cottage system was adopted as the one best calculated to meet the wants indicated, red brick being the material selected. The hospital, therefore, as regards the housing of patients, is composed altogether of cottages.

Opened January 21, 1890,¹ with two cottages erected in 1889, the number has since been increased to ten, five for men and five for women, grouped on each side of a central administration building so as to form with it three sides of a square. A large structure in rear of the administration building, known as the "Center Building," was intended to provide accommodation for the kitchen, laundry, store, amusement hall, chapel, bake-shop and boiler house, but an arrangement suited to meet the wants of chronic patients did not suffice for the needs of the acute, and when the character of the institution was changed, the foregoing provisions were found to be very inadequate. It was, therefore, deemed necessary to provide additional room, and this was done by the construction of a separate building, in which provision was made for a store on the ground floor and a combined assembly hall and chapel on the first floor. The space which had been occupied by the store and amusement hall in the center building thus became available for a reorganization and reconstruction of the laundry. In rear of the center building again is located a carpenter shop, in which space is provided for a paint shop and blacksmith shop, while in the basement are coal vaults and a root cellar.

All the cottages are connected with each other and with the administration and center buildings by a system of subways. These afford protection to the pipes for the distribution of water and heat, the wires for electric lighting, and the facilities for the conveyance of food from the kitchen to the cottages.

One hundred and twenty-five acres of the farm, designated "North Farm," are located about a mile away from the asylum, and here are situated the bulk of the farm buildings, as well as separate houses for the farmer, mason, etc., and an additional cottage occupied by 20 male patients who work on the farm and in the barns all the year round. Another block of land, comprising

¹ The first party of patients, consisting of 116, was sent from Toronto Asylum.

some 73 acres, commonly known as the McNeill Farm, was acquired in 1903. This, combined with the North Farm and the 60 acres in the lot on which the cottages, etc., are located, brings the total area of the hospital property up to about 260 acres.

For the management of the institution there is a medical superintendent and three assistant medical officers, a bursar, store-keeper, matron and assistant matron. One of the assistant medical officers has charge of the men's cottages and one of the women's. They exercise their functions under the direction of the superintendent, who visits the groups of cottages each alternate morning, accompanied by the medical officer in charge. One chief attendant has the supervision of the male patients and another of the female, and are directly responsible to the respective medical assistants. In each cottage there is a supervisor and a staff of day and night attendants. In addition to the foregoing there are heads to the various departments, such as an engineer, carpenter, farmer, electrician, baker, etc.

Acute and probably recoverable cases are admitted to the reception wards of two of the cottages set apart for that purpose, each accommodating 60 patients. In these, besides the spray baths common to all the cottages, there are provided continuous baths and other hydrotherapeutic appliances. Here, too, the proportion of nurses to patients is much larger and there are a number of single rooms, so that, while they do not differ materially from the other cottages, they meet reception requirements fairly well. Dr. Beemer, the superintendent, states, however, that the greatest need of the hospital is a properly constructed and equipped building for the reception of acute cases, where work may be done which is not attempted in the cottage reception wards. Such a structure, he further says, has for several years been under the consideration of the government, but other more pressing structural operations have so far crowded it into the background.

Soon after the opening of the establishment it was found that prompt attention would have to be given to the provision of a proper water supply. A pipe, extending 2000 feet from the shore line into the lake, had been laid, but this, owing to defective joints, allowed locally contaminated water to enter, with the result that the drinking water so polluted was the cause of several outbreaks of typhoid fever. The defect was remedied by sinking a well at the pumping station, and by depressing the inner end of the intake

pipe so as to allow the water from the lake to enter it by gravity instead of being drawn into it by suction from the pump. It also became necessary, in order to protect this pipe near the shore, to excavate a trench in the rock for it and cover it over with cement, so as to prevent damage during heavy storms.¹

Another subject which required much attention in the early days was connected with a plant for the disposal of sewage. A sewage house was constructed with filtration beds. After the deposition of organic matter from the sewage, the liquid residue was distributed upon these beds, the surplus water being allowed to escape into the lake. Several years of experimentation were required before a satisfactory degree of efficiency in the plan could be reached.²

Dr. William T. Reynolds, then second assistant physician of Hamilton Asylum, was the first officer in charge of the establishment, having assumed duty January 13, 1890. He remained as such up to September 13, when he returned to the Hamilton institution. Dr. John Cascaden was appointed his successor as first assistant physician of Toronto Asylum, resident at the Mimico branch. On November 27 Dr. Cascaden resigned his position and was succeeded by Dr. J. B. Murphy, who entered on his duties, January 16, 1891. After three years' service as resident medical superintendent, Dr. Murphy was appointed medical superintendent of the new Brockville Asylum, and retired November 15, 1894. He was followed on the same date by Dr. Nelson H. Beemer, assistant superintendent of the London Asylum, who became the first medical superintendent of the Mimico Asylum, *vice* the Mimico Branch Asylum, which ceased to exist.

Dr. Beemer still retains charge, and during his tenure of office the hospital has continued to progress steadily onward, while many important improvements have been made, among them being the following major ones: A separate brick residence for the superintendent was completed and occupied in 1896. In 1898

¹ An ingenious device of the engineer, connected with the pipe joining the main water supply pipe to the fire hydrant system surrounding the buildings, makes it possible to use the pump at the pumping station as an auxiliary in the event of the regularly installed fire pump being disabled at any time.

² The great drawback to the filtration system as originally introduced was the saponaceous residuum from the laundry. This, forming a coating over the filtering material used, prevented its proper action.

the new amusement hall was erected, and in 1900 an improved cold-storage plant was provided. This was followed in 1901 by the construction of a modern conservatory, while in 1904 the old wooden bridge across a ravine which traverses the property was replaced by a highly ornamental one of stone and concrete. In 1906 Cottage 2, which had been destroyed by fire the previous year, was rebuilt. In 1907 a commodious brick barn, with steel framework and cement floor, was erected on the McNeill farm, and in 1909 the old barn on the North Farm, together with the horse and cow stables, was replaced by an up-to-date and capacious new structure. In addition to the foregoing structural improvements a vast amount of time and labor has been given to the ornamenting of the premises, the planting of trees and the making of walks and drives. In this connection a large recreation ground in the form of a circle, 150 yards in diameter, was made between the cottages and the lake on the western side, while opposite on the eastern side a park was laid out, which will always provide an attractive and healthy resort for the population during warm weather. It is worthy of note that all this work, as well as the building improvements, in the main has been the work of patients under the supervision of the various heads of departments connected with the hospital staff.

A training school for nurses was organized in 1910 and good results have been obtained from it, though, as Dr. Beemer says, its success has been militated against by constant changes in the nursing staff; changes in great measure due to an all-pervading feeling of unrest and desire for change among the employees that has been only too common in all our hospitals during the past 10 or 12 years.¹

The total present capacity of the establishment is 600, while at the end of the official year, in 1914, the patients resident numbered 660, made up of 340 men and 320 women.²

¹ By law the establishment of a system of training for nurses is now compulsory in all the Ontario insane hospitals. A central examining board, consisting of three members selected by the Hon. Provincial Secretary, issues similar examination papers for the various institutions. The first examination under the new system was held in March, 1910.

² This is 10 per cent above the normal capacity of the hospital, the extra accommodation for 60 patients being regarded as only temporary pending the provision of room elsewhere.

HOSPITAL FOR INSANE.

BROCKVILLE.

The site chosen for Brockville Asylum, which was designed to serve the needs of the nine most easterly counties of Ontario,¹ was originally known as the Pickens Point property. This consisted of 190 acres of land bordering on the St. Lawrence River hard by the town of Brockville, and the construction of the first building was begun in 1892 under the administration of the late Hon. C. F. Fraser, at that time Minister of Public Works for the province. Whatever virtue may lie in beauty of view can fairly be claimed for the location of this hospital, as it is erected on a point of land some 154 feet above the river, and commands an outlook of the majestic St. Lawrence for miles, both to the east and west. The institution was opened December 27, 1894, by the transfer of 73 patients from Mimico.

The grounds of the institution run directly to the water's edge, and no fairer site could have been chosen for its particular purpose than this restful spot at the eastern end of the fairyland known to the world as the Thousand Islands. On the one hand lies the broad, placid bosom of the river, and on the other the matchless vista of the islands. Up the gentle slopes from the river bank and in harmonious contrast to the green lawns and terraces of the park-like grounds stand out prominently the red brick buildings of the hospital.

The constructional features adopted were those embodied in a modified cottage system and an administration block. A main building for 170 acute cases and six cottages for chronic cases, each having a capacity of 55 beds, were called for by the original plans. These various structures are grouped somewhat after the shape of a crescent, the main building forming the center of the convexity. The walls of all the buildings above the basement, which is built of limestone quarried on the premises, are of cherry-colored pressed brick, with cut stone trimmings and terra cotta panels and ornaments. The main building is 400 feet long and 50 feet wide, with wings subsequently added for dining rooms, dormitories and day rooms. Each wing is divided into three halls,

¹ These are Leeds, Grenville, Dundas, Stormont, Glengarry, Prescott, Russell, Carleton and Lanark.

accommodating in all over 300 patients. In the central part of the main building are located the administration offices and residential quarters of the assistant medical officers. Behind the offices and connected therewith by a broad corridor are the patients' quarters, while in the rear again lie the kitchen, storeroom, laundry, bakery, etc.

On each side of the main building are three cottages. The three to the east are for women and the three to the west for men. Each cottage has its own dining room and the meals are conveyed from the main kitchen by a tramway at the rear. Provision has been made in the general heating system in each cottage to have the plates heated for meals. Each cottage is divided into dormitories and single rooms and is fronted by a capacious veranda. These cottages are attractive as to their exterior, are well lighted from large windows and the wards and halls are made as bright and cheerful as possible. They are very comfortable homes for the care of the chronic insane.

In 1908 and 1910, respectively, solar rooms of stone and concrete were built on the male and female sides, connecting the main building with the adjacent cottages. These rooms have proved very beneficial as hospital wards and are used at the present time for the newly admitted patients, where they have the benefit of ample light, fresh air, etc., and are convenient to completely equipped hydrotherapeutic rooms, which at the same time were installed on both male and female sides. A separate room was set aside for continuous baths.

In 1909 an assembly hall, 51 x 100 feet, of concrete and steel, large enough to suit the requirements of the institution, was completed, and was formally opened by the Honorable W. J. Hanna, Provincial Secretary, in January, 1910. This has proved to be a very great benefit to the institution, not only for church services, but for concerts and dances during the week; directly under it is situated the stores department, into which are received and from which are distributed on requisition all the supplies of the institution.

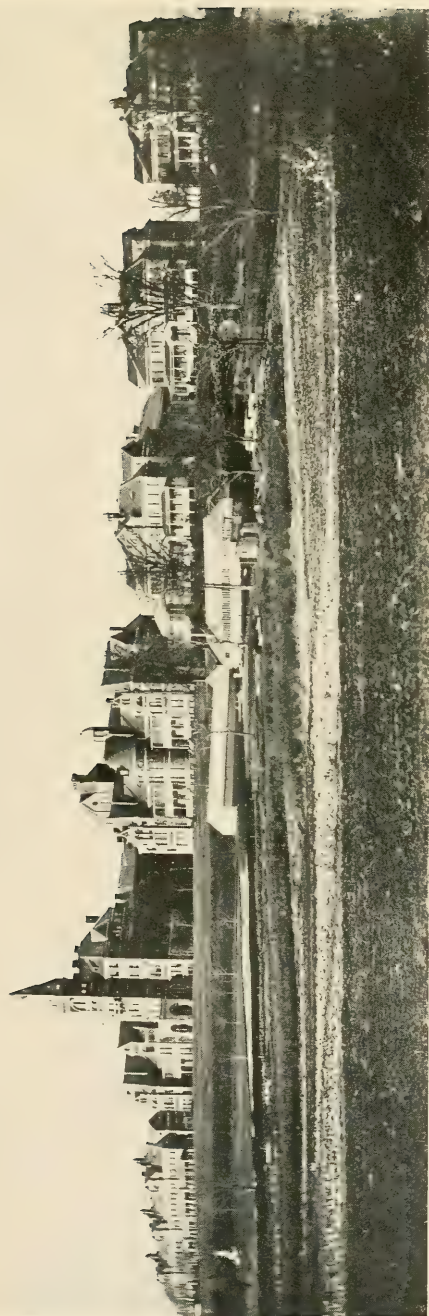
In 1904 a skating and curling rink was built and this was enlarged in 1912, so that it is now very complete and is of material assistance in entertaining the patients during the long winter months.

In 1912 the excavation was begun and the foundation built of a new admission hospital. The construction was completed in 1915, and as soon as furnished it will be ready for occupancy. This building is 200 feet long and about 40 feet wide, with administrative offices and residence for one physician and trained nurse in the central portion. A good operating room has been placed in it. The better classification thus made possible will, it is confidently expected, aid very materially in the treatment of acute cases. The capacity of the new structure is for 60 patients, 30 of each sex.

In 1912 a room in the central building was reconstructed so as to make a modern operating room. It is now fully equipped with all necessary appliances for operative surgery, and a large amount of surgical work has been done since its completion. This will, however, be supplanted by the new one above referred to.

At a reasonable distance from the main building commodious farm buildings are situated. There are about 170 acres of land, but a great part of this is of rocky formation and is not of much use, except for pasturage. A portion near the building is devoted to gardens and these are very productive. Excellent greenhouses are located quite close to the building.

In 1911 and 1912 an additional property for the institution, viz.: a farm of 320 acres of fertile soil, situated about two miles from the hospital, was purchased by the government. This makes the total of land owned by the institution about 510 acres. Nineteen miles of drains have been put in this new land, which have greatly added to its productivity. The buildings on these farms have been utilized by having some slight changes made in them, so that about 20 patients are in residence there, with a married couple to take charge. An additional building, a brick cottage, has been put up and occupied, and eventually 30 male and 5 female patients will be placed there permanently under the direction of a supervisor and his wife. New silos are being built and changes made in the farm buildings. Eventually this land will become a source of revenue to the hospital, as many of the daily requirements will be produced there.



GENERAL VIEW, BROCKVILLE HOSPITAL.

TRAINING SCHOOL FOR NURSES.

The first training school was begun in October, 1903, under the supervision of the late Dr. J. B. Murphy, then medical superintendent. A two-years' course was undertaken and it proved to be of great benefit to the nurses. A diploma was given to the successful students for training in mental nursing alone, signed by the medical officers of the hospital. In 1909 the school was merged, in common with the others of the Ontario hospitals for insane, under a central board of examiners, the course being increased to three years and standardized for all. This excellent plan was fathered by the Hon. Provincial Secretary, and worked out by Mr. S. A. Armstrong, Deputy Secretary of the province, and Dr. R. W. Bruce Smith, inspector of hospitals. It has been very successful and a full training course in nursing is now given. Many of the graduates have taken post-graduate work in other hospitals and have proved themselves capable of filling high positions in the nursing world. The nurses of this hospital have been greatly interested in the training and have stood well in their provincial examinations.

INSPECTORS.

The work in all the hospitals has always been very much under the direction of the inspectors, appointed by the provincial government. Messrs. R. Christie and Noxon were inspectors at the time this hospital was opened. Mr. Christie at that time took a great interest in the work in connection with the hospitals for insane. He had been for many years in that position and his work was very satisfactory. In 1905 these inspectors were succeeded by Messrs. S. A. Armstrong and E. R. Rogers, the former of whom took a very active part in inaugurating a new filing system and a new case-book system for patients. Mr. Rogers has had charge from the time of his appointment of the supplies, requirements and general improvements.

MEDICAL OFFICERS.

The first superintendent was Dr. J. B. Murphy, a graduate of Trinity University, Toronto, who was for a short time in general practice in Belleville. He was first appointed to the public service

as superintendent of the Institute for the Deaf and Dumb in that city. He was removed from Belleville to be made resident superintendent of the Hospital for Insane which was opened at Mimico in 1890.¹ His practical adaptability to work in connection with the establishment of a new hospital, as evidenced there, caused him to be made superintendent at Brockville, and the improvements made in his regime are a lasting tribute to his memory.

In January, 1904, Dr. Murphy died very suddenly, and was succeeded by Dr. Thomas J. Moher, also a graduate of Trinity University, Toronto, 1889, who had been in general practice in Trenton and Peterboro for some years before entering the public service. At the time of his appointment to succeed Dr. Murphy he was assistant superintendent at Orillia. He was very energetic and took a deep interest in the work of the institution, and carried on and completed many of the improvements inaugurated by his predecessor. Early in his regime he began what is now the common practice of having a conference by the medical staff on the condition of each patient, and he recognized the importance of having a comprehensive history taken in each case. During his time the solar rooms were built, hydrotherapeutic equipment installed, a bowling green and skating rink added to the amusements, and the general condition of things very much bettered.

On the 1st of November, 1910, Dr. Moher was transferred to a similar position at the Hospital for Insane at Cobourg, and was succeeded by Dr. J. M. Forster, who had been in the service for a number of years. Dr. Forster was a graduate of Toronto University. He had always taken a great interest in his work, particularly in the study of the mental condition of those under his care. At the time of his promotion he was assistant superintendent at the Hospital for Insane at London. Dr. Forster only remained for six months, but the work did not lag under his direction and he prepared plans for the new admission hospital previously mentioned.

In May, 1911, Dr. Forster was placed in the important position of superintendent of the Hospital for Insane at Toronto, and Dr. J. C. Mitchell, a graduate of Trinity University, Toronto, was made superintendent. Dr. Mitchell had been in general practice in the County of Durham for over 20 years and entered the public

¹ *Vide* History of Mimico Asylum.

service in 1902. At the time of his promotion he was assistant superintendent at the Hospital for Insane, Hamilton, but had previously occupied the post of assistant superintendent at this hospital from October, 1904, to November, 1910.

The following have filled the position of assistant superintendent:

Dr. W. K. Ross, graduate of McGill University, from the opening of the institution, December, 1894, until July, 1900. He is now assistant superintendent at the Hospital for Insane, London.

Dr. R. W. Bruce Smith, graduate of Toronto University, from July, 1900, until October, 1904. Dr. Smith is now one of the Inspectors of Asylums for the province.

Dr. J. C. Mitchell, the present superintendent, from October, 1904, until November, 1910.

Dr. P. MacNaughton, graduate of Trinity University, from November, 1910, until May, 1911.

Dr. F. L. Neely, graduate of Western University, London, from May, 1911, until March, 1913.

Dr. Vrooman, graduate of Toronto University, is at present assistant superintendent.

The population of the institution at the close of 1914 was 717, composed of 349 men and 368 women.

COBOURG ASYLUM.¹

Owing to the congested condition of the then existing asylums, especially as regarded accommodation for women, the government in 1902 resolved on the location of a new colony for female chronic patients only at the town of Cobourg. This institution was created by the purchase and conversion of Victoria College, the scholastic headquarters of the Methodist denomination prior to federation with Toronto University, into an asylum for the insane. The building, beautifully situated on a high elevation overlooking Lake Ontario, was remodelled and fitted up for the reception of 150 patients, the first contingent of whom, consisting of 31 transfers from Mimico and 31 from London Asylum, was admitted on January 14, 1902. On the 28th of the same month, 29 were received from

¹ Now Hospital for Insane, Cobourg, Ont.

Toronto Asylum, and on the 26th of the succeeding month (February) 40 from Hamilton Asylum, while on March 25, 12 were transferred from Kingston Asylum. In addition, two outside patients were received on certificate by order of the inspector, making in all 145 patients housed during the first year of occupation.

The original premises, which consisted of but a few acres, were later increased in size by the purchase of some additional land for gardening purposes, making the total present area of the property 11 acres.

The first superintendent was Dr. E. C. McNicholl, of Cobourg, appointed in 1901, who had as assistant Dr. Harriet Cockburn,¹ of Toronto, who continued to fill the position until September 30, 1906. Dr. McNicholl remained in office until September, 1905, when he resigned. During his term much was done toward completing the organization of the institution. A successor was found in the person of Dr. Charles E. Hickey, who acceptably filled the position up to the date of his sudden and unexpected death, September 19, 1908. Dr. Hickey worked energetically during his too short (three years) time in charge, and in his first report² we find him urging that the institution should be opened to men as well as women, a separate building being erected for the former, in which could be provided a hall for amusements and religious services, for neither of which were there aught but makeshift facilities.³

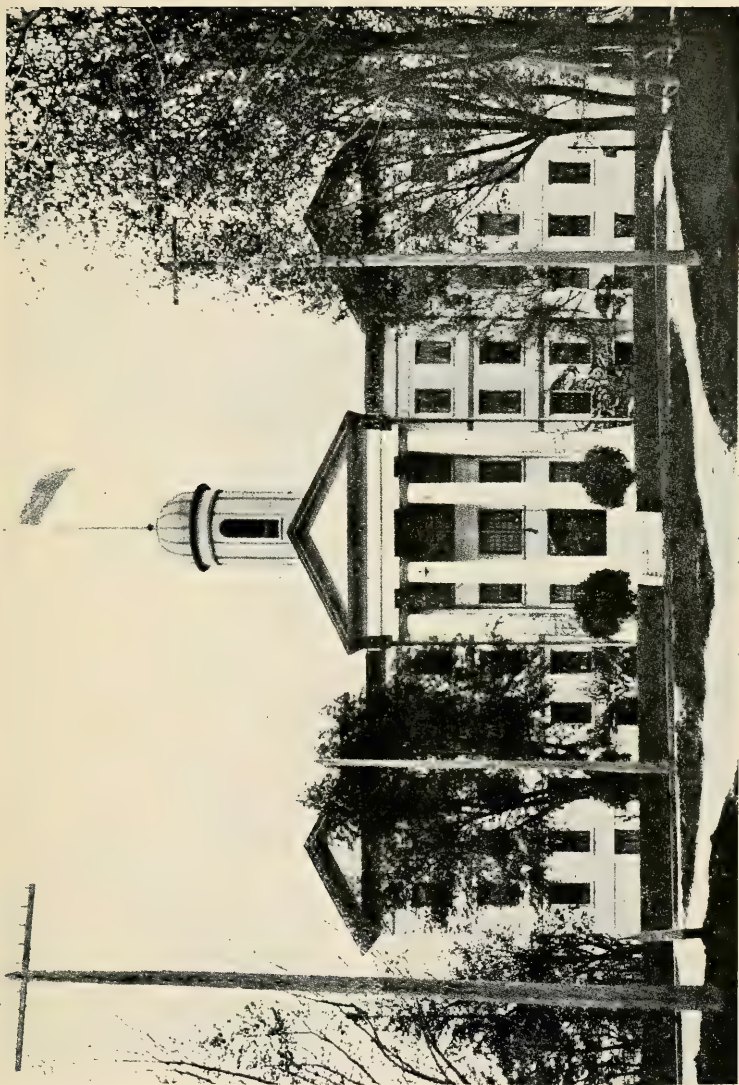
In the spring of 1904 the erection of a detached residence for the medical superintendent was begun at the corner of College Street and University Avenue, a short distance from the hospital, and occupied in the autumn of the same year.

On the death of Dr. Hickey Dr. W. T. Wilson was appointed to the position thus made vacant. Dr. Wilson, who assumed duty

¹ Dr. Cockburn was the first female physician to enter the Ontario service.

² Thirty-eighth Annual Report of the Inspector of Prisons and Public Charities upon the Lunatic and Idiot Asylums of the Province of Ontario, being for the year ending 30th September, 1905, p. 112.

³ Dr. Hickey's request was not met. The building is still occupied by females only and no assembly hall has been provided. It is quite likely that on the opening of the new Whitby hospital the Cobourg patients will be transferred thither.



MAIN BUILDING, COBOURG.

in November, 1908, had spent many years in the service, having creditably filled responsible junior places in the asylums at Hamilton, Brockville, London, and Toronto. In November, 1910, on his transfer to the charge of the Penetanguishene Hospital for Insane, Dr. Thomas J. Moher, for seven years previous medical superintendent of the Brockville Asylum, was named to replace him. Dr. Moher having died in harness, February 24, 1914, the duties of office fell upon Dr. George C. Kidd, previously assistant physician at Toronto Hospital, who still remains in charge, as acting medical superintendent. Dr. Kidd assumed office in March, 1914.

The main advances made in Dr. Moher's time were the abolition in 1911 of the system of locking the patients, all chronic and harmless, in their dormitories at night, and the starting in 1913 of lectures to the nurses. The former acceptable change was rendered possible by an increase in the staff of night nurses; the latter was a temporary expedient, adopted preparatory to the formation of a regular training school.

The establishment, which is lighted by electricity, the power for which as well as the water supply is furnished by the town of Cobourg, has a capacity of 160, with a resident population of 155, at the close of the official year in 1914.

PENETANGUISHENE ASYLUM.¹

An Order in Council, made in 1904, authorized the transformation of the Reformatory for Boys at Penetanguishene into an asylum for the insane. This, the eighth of the Ontario public institutions for lunatics, is situated on Georgian Bay, a portion of Lake Huron, in the County of Simcoe, two and a half miles from the town of Penetanguishene, an Indian name signifying "the place of the white rolling sands." It is built on ground 100 feet above the water, and from this picturesque site there is a most beautiful view of the bay and some of the 30,000 islands which dot its surface.

Destined for the reception of patients, male and female, of the chronic class only, its population is made up of transfers from the older and larger provincial establishments.² The removal of

¹ Now officially named "The Hospital for Insane, Penetanguishene."

² A very few acute cases have occasionally been received for urgent reasons.

the boys, its former occupants, was effected early in 1904 and the work of alteration and reconstruction at once begun. This was rapidly proceeded with, and on August 1 of that year the building was opened with accommodation for 225 patients in the main structure, the first quota of patients (50) being admitted from Mimico Asylum August 16.

The buildings, constructed of stone and brick, consist of a large granite center edifice used for executive offices, quarters for female help, and an amusement hall; while a wing on either side, also stone, with balconies at their extremities, is occupied by female patients. In rear of the main structure are two brick cottages for male patients, a laundry, carpenter and bake shop, etc. Residences are provided for the superintendent, bursar and storekeeper, also 15 cottages for married employees. The single male attendants sleep in a separate cottage. Ample dining room accommodation is provided in two rooms for patients, while the male and female help take their meals in separate dining rooms.¹

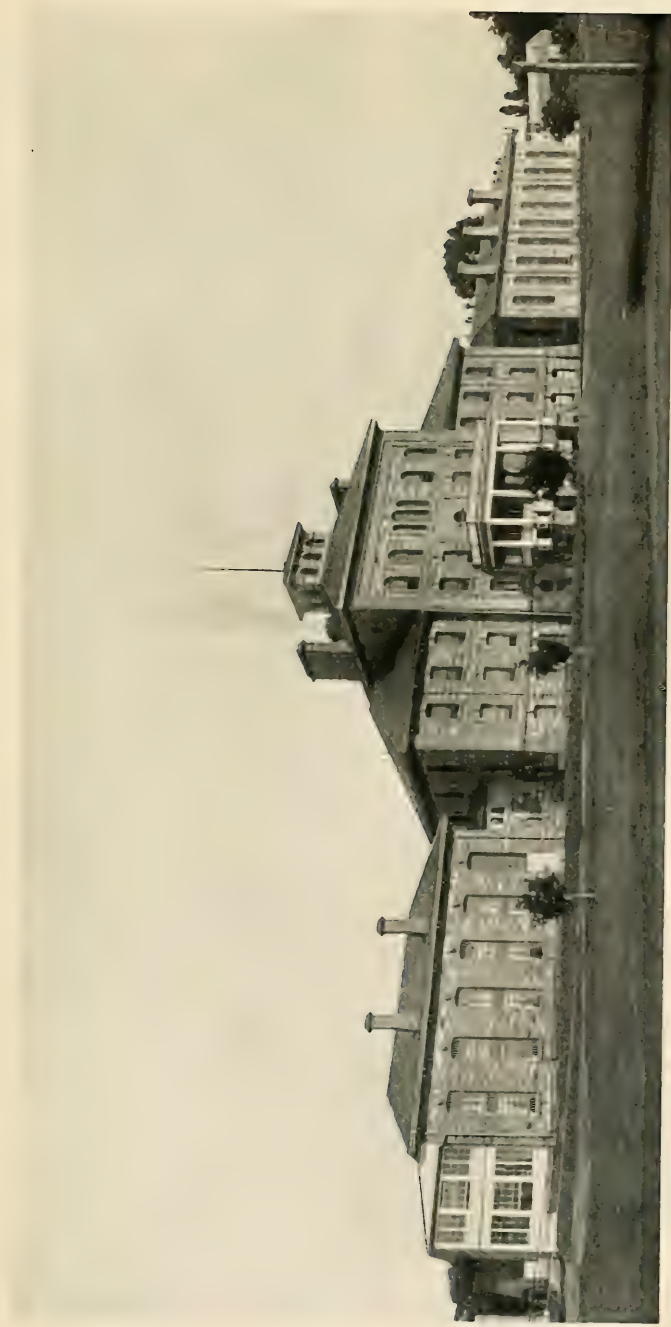
Opened with a capacity of 225, this has since been increased to 370. The additional accommodation was gained by the conversion, chiefly made in 1907, of some of the old reformatory handicraft buildings into dormitories for men.² The number of patients in residence at the end of 1914 was equal to the capacity, being made up of 166 males and 204 females.

In 1909 electric lighting was installed in the institution, a power house being erected on the shore of the bay. In 1913, however, it was found that it would be more economical to obtain power for all purposes from the Hydro-Electric Power Commission through the town of Penetanguishene, and the change was accordingly made.

For some years water was supplied to the hospital by Penetanguishene, but this source proving not quite satisfactory, in 1914

¹Under date of June 30, 1915, Dr. Wilson, the superintendent, writes: "A large frame building, formerly occupied by the assistant physician, is now being remodelled for a nurses' home, on the completion of which the quarters in the main building now devoted to the use of nurses will be fitted up for the assistant physician."

²*Vide* Fortieth Annual Report of the Inspector of Prisons and Public Charities upon the Hospitals for the Insane, Idiotic and Epileptic of the Province of Ontario, for the year ending 31st December, 1907, pp. ix, 174 and 175.



MAIN BUILDING FROM BOWLING GREEN, HOSPITAL FOR INSANE, PENETANGUSHENE.

a pumping station was erected at the extreme northeast end of the hospital property, so that an unlimited quantity of water for all purposes is now obtained direct from Georgian Bay.

The sewage up to June, 1914, was run directly into the bay without being treated, but is now distributed over the land. Passing through trenches, it is collected by tile, and passed through a specially prepared percolator, the result being that only a perfectly clear, non-smelling liquid is allowed to enter the bay. In this way all source of danger by contamination of the water is removed.

The hospital property comprises some 370 acres. This is mostly wooded, but by degrees a good-sized farm is being got under cultivation. At present, however, while all vegetables and roots necessary are grown on the premises, grain has to be purchased.

The establishment was opened on August 1, 1904, under the superintendency of Dr. P. H. Spohn, of Penetanguishene, a graduate of the University of Victoria College in 1869. On his resignation at the close of 1907 he was succeeded by Dr. G. A. MacCallum, who was transferred from the London Asylum. In November, 1910, Dr. MacCallum having also resigned, Dr. W. T. Wilson, the present superintendent, was transferred from the superintendence of Cobourg to assume charge.

WHITBY HOSPITAL.

The usefulness of the antiquated Toronto Asylum had been much lessened by the diminished area of its property,¹ which proved a barrier to the employment of patients and by the fact that it had become closely environed by the city on all sides. In addition, its retention in use would necessitate a very large outlay for the installation of a modern heating plant, etc. As a result, it was decided by the government to dispose of the remaining land, which could be done at an advantageous figure, and erect a new structure elsewhere.

Immediately after the sale had been arranged the department of the Hon. Provincial Secretary undertook the selection of a new site and, after a careful examination of several properties, recommended the acquisition of a block of land immediately

¹ *Vide* Toronto Asylum and its branches.

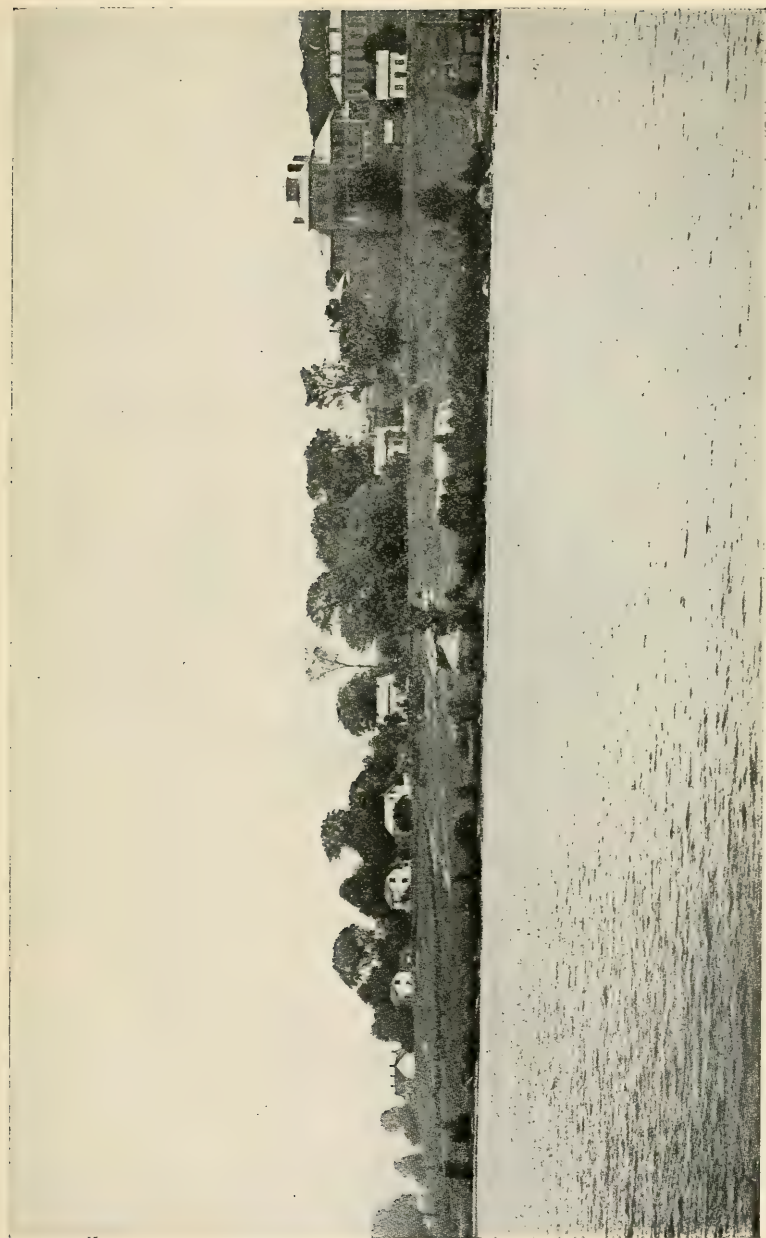
adjoining the town of Whitby, situated about 30 miles east of Toronto on the line of the Grand Trunk Railway, in the County of Ontario. This property, which was purchased by the province in the early part of 1912, is made up of several farms, comprising in all about 640 acres, bordering on the shores of Lake Ontario and Whitby Harbor. The soil, which is mainly a clay, is exceedingly fertile, while about 20 acres of sandy loam are excellently adapted for gardening. Great natural beauty, existing trees, orchards and roads, convenient railway and water facilities, all emphasize the suitability of the site chosen for hospital purposes.

The plans adopted, prepared by Mr. Jas. Govan, Provincial Architect, provide for what may be designated a "hospital village," where all features that suggest detention will be eliminated as far as practicable. The various buildings are grouped on a wide, gentle slope, having the advantage of a southeastern exposure. From this situation are extensive open views across Lake Ontario to the south and Whitby Harbor to the east; the town of Whitby lies to the north, and to the west is a prosperous farming country.

The general arrangement consists of three groups of buildings, or "centers," a hospital center and two cottage centers behind it, one for men and one for women, but separated from it by the recreation and athletic grounds.

The hospital center comprises an administration building and four hospital buildings, with a central kitchen and dining rooms in the rear. Two of these structures, accommodating 63 patients each, will be used as admission or observation hospitals and for incipient cases; with these should be included two convalescent cottages, accommodating 35 patients each. The other two structures, each accommodating 104 patients, will provide for the acute cases.

In this center will be placed all newly admitted cases, all requiring special attention owing to suicidal tendencies or for any similar reason, and all demanding ordinary hospital treatment on account of bodily or mental illness. In the admission or observation hospitals patients can be received, cared for and treated, then, if satisfactory progress is made, given a period of probation in the adjoining convalescent cottages, without coming in contact with cases of longer duration in the institution.



MAIN BUILDING AND EMPLOYEES' COTTAGES FROM THE BAY, PENETANGUISHENE.

The cottage centers consist of two groups of cottages, accommodating 52 patients in each cottage. For each group an infirmary is provided, which will care for all cases assigned to cottage centers, who require special nursing on account of general feebleness or bodily illness. These centers are intended to house all patients who do not require, or who have ceased to require, for a time at least, special medical treatment—the more easily managed patients, the working patients, and all likely to be benefited by the suggestion of normal home life.

For each hospital and cottage group a central kitchen is provided with separate dining rooms attached, in order that the classification of patients arranged in the cottages may still be maintained at their meals.

This division of the establishment into two sections, hospital and cottage, separates the patients requiring constant medical attention and nursing from those demanding only medical supervision as regards personal hygiene and occupation.

Isolation hospitals will permit of the proper segregation of all cases of tuberculosis and other diseases requiring to be isolated from the general medical hospitals.

A group of cottages, located some distance from the hospital and cottage centers, will provide superior accommodation for private patients, while detached residences will be furnished for the medical superintendent and his assistants, as well as for tradesmen and married attendants. A nurses' home and an attendants' home have not been forgotten in the planning as a provision for the comfort of single employees.

The amusement of the patients and staff will be catered to by the erection of a hall for concerts, dances, etc., a skating and curling rink, a bowling alley and a gymnasium, while for religious instruction a chapel will be constructed.

The power plant, laundry, bakery, workshops, store, etc., are placed at some distance from the residential portion of the institution.

The buildings when completed will have a capacity of 1500, and are so planned that units for 500 each can be added without disarranging the original design.

No building for patients will be more than two stories high, and all walls, partitions, floors and ceilings will be fireproof in

construction. The foundations of all buildings will be of concrete, but walls and partitions above the basement level will be built of concrete structural tile.¹

Gardens will be laid out around the cottages, providing healthful out-of-door employment for patients, with desirable mental occupation. It is thought that such garden surroundings and the effect of trees and shrubbery, so arranged that no view will show more than one or two cottages, will tend to create a cheerful, homelike atmosphere. The extended system of cottages and hospitals will necessitate a considerable length of roadway through the property. While planned on the score of utility, these roads will be laid out as winding drives, so as to permit a park-like development of the immediate site of the various buildings.

Careful consideration of the special requirements in the matter of heating has resulted in the adoption of a system of hot water heating, under forced circulation, as being the most efficient and economical. The water will be heated by exhaust and live steam, and circulated by centrifugal pumps in duplicate to ensure continuous service. As regards ventilation it is proposed to depend as much as possible on natural means, assisted by an indirect system of supplying pure, warmed air, with exhaust ventilation for use in very cold weather, when the spontaneous tendency will be to keep all windows closed.

The sewerage system provides for the convenient removal of sludge; bacterial treatment through a bed of crushed stone to break up and render inoffensive the organic matter in the liquid; and finally chemical treatment to destroy all disease-producing bacteria. As there are two drainage levels on the site, it will be necessary to collect sewage from the lower level in a sedimentation chamber and pump it to the main disposal plant for treatment in contact beds. For this purpose an electric pump will be installed, with an alternative arrangement whereby the effluent can be pumped onto the land of the farm for irrigation purposes in dry seasons if required.

On April 28, 1912, three qualified working patients, in charge of a carpenter, were transferred from Toronto Hospital to the

¹ This tile will be made at the Central Prison, Guelph, Ont., whence also will be drawn the labor, as far as practicable, necessary to construction, the making of roads, etc. A temporary camp for about 100 prisoners, with guards, has been completed.

Vanstone Cottage, a structure already existing on the recently purchased property. Such was the beginning of the new hospital. This transfer effected, a bungalow was erected by these patients to accommodate 40 inmates who work on the farm generally. Ground was broken for the hospital proper on May 6, 1913, since which time work has been going steadily on under the personal direction of Mr. S. A. Armstrong, Assistant Provincial Secretary, and Mr. James Govan, Provincial Architect, aided by Dr. Forster, medical superintendent of the Toronto Hospital, as medical adviser.

ORILLIA ASYLUM.

The Orillia Asylum for idiots was primarily located on a plot of 13 acres lying near the northern boundary of the town of Orillia, and on the west shore of Lake Couchiching.¹ The building was originally intended for a summer hotel, but was left unfinished, and was purchased in 1859 by the Province of Canada, to be fitted up as a branch lunatic asylum in connection with the Toronto institution. In 1860 plans were prepared for this purpose, and the structure was completed at a cost of \$18,135, being opened in 1861.²

Vacated by the insane in 1870, it was in 1876 again fitted up, with some additions, to accommodate 150 idiots, and on September 25 of that year was opened under the superintendence of Dr. J. M. Wallace for the reception of this class of patients, 35 of whom were transferred to it from the idiot department of the London Asylum, together with several of the most pressing cases then incarcerated in gaols, bringing the total up to 44. On February 9, 1877, Dr. Wallace having been made medical superintendent of Hamilton Asylum, Dr. A. H. Beaton, a graduate of Victoria University College in 1864, was appointed his successor.

The building at this time was a three-story brick one, having a frontage of 115 feet and a depth of 56 feet. A wing added on the east side was 32 feet by 24 feet, and there was a rear extension made in the center, 60 feet by 24 feet, for kitchen and laundry

¹ Now Couchiching Park.

² *Vide* "Toronto Asylum and its Branches" and Twelfth Annual Report of the Inspector of Asylums, Prisons and Public Charities for the Province of Ontario for the year ending 30th September, 1879, p. 47.

purposes. The upper stories of these additions were arranged in single rooms, 20 in number, while the other portions of the structure were devoted to associate dormitories, dining rooms, attendants' rooms, bath rooms, etc. The ground floor of the central building contained a reception room, offices and officers' apartments. Steam generated in two boilers was the medium for heating, and water was pumped from the lake into three tanks containing about 5000 gallons. Gas for lighting was made on the premises.

Very soon the capacity of this primitive institution was taxed to the utmost, and the basement wards of the newly opened Hamilton Asylum had to be adapted to the use of the feeble-minded. The room thus gained was soon occupied, however, while applications continued to pour in. In consequence, another hotel, "The Queen's," which was then vacant, was leased by the government and made ready for the reception of the idiots then cared for at Hamilton.

Congestion was again quickly marked. The government, therefore, in 1885 purchased a fresh site of 150 acres, beautifully situated on the shore of Lake Simcoe, about a mile outside the limits of Orillia, and began the erection of a new establishment thereon. In November, 1887, the boys' cottage was ready, and the inmates of the former Queen's Hotel were transferred to it, while in February, 1888, the girls' building was finished and filled from the original structure, plus some cases, about 30 in number, that had been sent to Kingston Asylum. In this year also the first Canadian training school for feeble-minded children was started, with Miss M. B. Christie in charge.¹

Contracts for the main edifice were let in 1889, and on April 1, 1891, the original building was once more vacated and the whole household transferred to its present home.

The asylum thus completed consisted of a main building and two large three-story cottages. The ground floor of the former was specially designed for teaching purposes, whereby feeble-minded children could be trained and improved, so far as their physical imperfections and mental status would permit; the first and second floors were devoted to dormitories and sitting rooms for the same class. The main building also contained the admin-

¹ This was conducted for several years in the original building.

istration quarters and had an amusement hall sufficiently large to seat comfortably 1000 persons. The cottages formed the custodial department for adult idiots and those unfitted to attend the school.¹ All the structures were of red brick, with cut-stone trimmings.

In his 1897 report we find Dr. Beaton, *Oliver Twist*-like, asking for "more." His institution, he states, is filled and he has over 139 applications on file, the claims for admission in which cases were being pressed urgently by friends and municipal authorities. He suggests three plans for the remedy of this, the most necessary of his wants. First, the making of separate provision for epileptics, of whom he had 130, as was being done in the United States and Europe; second, the erection of two inexpensive cottages for non-working men and women; and, third, the purchase of an additional farm on which could be constructed a building for working patients. The doctor also advises the introduction of electric light to replace the gas in use, saying: "We have so many mischievous and irresponsible boys that the utmost vigilance has to be exercised to prevent accidents. For instance, on two occasions gasoliers have been torn down by epileptic lunatics, and on another occasion a boy was caught lighting a corn scrubbing brush, which he threw into a sink when discovered. These are

¹ There are two distinct branches to idiot asylum management. First, the merely custodial care of adult idiots, who are unable to take care of themselves and have no friends able or willing to take care of them; and, second, the care and training of feeble-minded children, who are thus in some instances restored to their friends, not cured, for that is impossible, but so much improved in intelligence and habits as to be able to live as other people do, and be little or no burden upon those with whom they are to reside. In the custodial part of the work Ontario was the pioneer on this continent, little or no heed having been paid to this branch in the United States, where, however, special attention had for years prior to the creation of the Ontario institution been given to educational features. Dr. H. B. Wilbur was the first on the continent who essayed the difficult task of educating idiots by starting a private school for feeble-minded children at Barre, Mass., in July, 1848. Subsequently, he removed to Albany, N. Y., where an experimental school was established. From this resulted the famous institution at Syracuse, N. Y., which was built in 1851, and presided over by its intelligent and benevolent founder up to May, 1883, when he was called to his long rest. Many states have since established similar institutions.

instances of the danger from gas.”¹ Dr. Beaton furthermore emphasizes the urgent need for more teachers and for trade instructors, as otherwise the institution would fail in the chief object had in view when it was organized.

In 1898 these requests were reiterated, special stress being laid on the need for increased room, the number of applications on file being 220 as against 139 at the close of the previous year.²

In 1902 Dr. Beaton urged the construction of two cottages for the custodial care of feeble-minded women of child-bearing age, not only as a means of securing increased vacancies for defective children, but as a preventive measure against the increase of such. As he cogently stated:

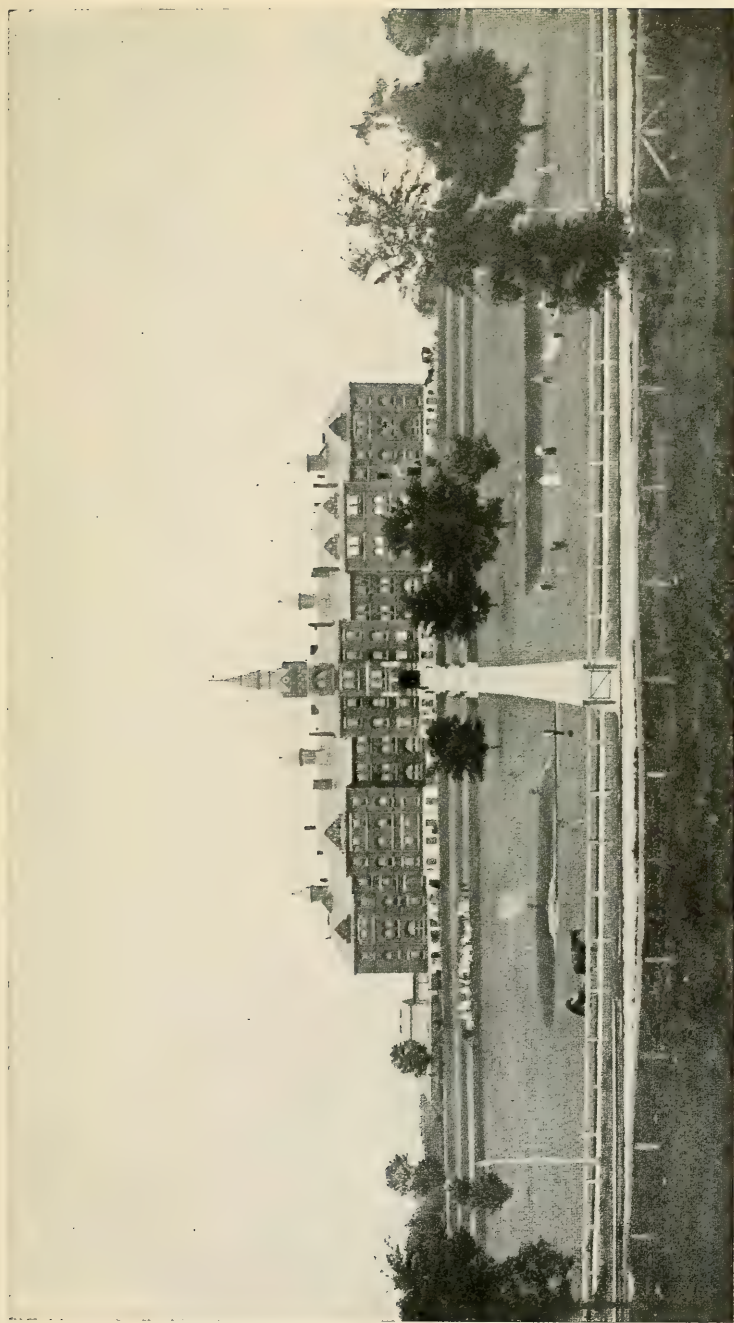
There can be no question about the wisdom of this step, and until something of the kind is done the rapid increase in the number of feeble-minded will continue. But if the 600 or 700 feeble-minded women, many of whom are steadily adding to the idiotic and otherwise defective population of the province, were confined in a custodial asylum, the number of defectives, paupers, and petty criminals would decrease, and in less than one generation the cost for maintenance of public institutions would be greatly lessened. These feeble-minded women could not only attend to the work of their own cottages, but could be utilized in doing work for the institution in the laundry and other domestic departments. I trust, therefore, that this matter will receive the consideration which I think its importance demands.³

The same year (1902) was an important one in the history of the asylum, inasmuch as its close saw a sadly backward step in the discontinuance of the schools, which had been in operation from 1888. The staff of teachers had been reduced to four, all of whom lacked the qualifications necessary in the special line of training required, so that this branch had become, practically, a dead letter. It was, therefore, abandoned for the time being, the superintendent expressing the hope that the schools would

¹ Annual Report of the Asylum for Idiots, for the year ending September 30, 1897.

² In 1899 the applications had increased to 291, and in 1904 to 574, though, as Dr. Beaton states in his report for that year, “As these applications cover at least 12 years, it would be safe to say that one-half could not be found now, while many of the others are indifferent as to whether provision is made for their accommodation or not.”

³ Annual Report of the Medical Superintendent of the Asylum for Idiots, Orillia, for the year ending September 30, 1902.



MAIN BUILDING, ORILLIA, PRESENT DAY.

soon be reopened with a capable staff of teachers, augmented by one to give manual training, so that the institution might be placed not only on its former popular footing, but far in advance.

The cause of this retrograde move was in great measure political, as is thus clearly set forth by Dr. Beaton some years later, viz., in his annual report for 1908:

In the early 90's we had a staff of eight teachers and the improvement of the 160 children under training was most marked. Our exhibit at the World's Fair in Chicago ranked among the best in the United States. In 1896, unfortunately for us, a change was made in the minister who had charge of the public institutions. At that time a great cry was made by the Patrons¹ over what they called the extravagant and useless expenditure in the matter of salaries for all public officials, and the local Patrons fell foul of our training school, and on the public platform ridiculed the idea of teaching idiots as a useless labor and extravagance. Since 1898 it has been uphill work for our school. The staff was reduced to three, and those not the best, and so indifferent was the improvement that on my advice the schools were closed for a time, with the understanding that they should be reopened in a few months with thoroughly trained and efficient teachers.

I was authorized to select from one of the best institutions in the United States a capable principal. One who had received the training in Sweden was selected and was very highly recommended by Dr. Barr, of Elwyn. She was advised of her appointment, but as soon as it became known that she was a native of Philadelphia some few persons interviewed the government and induced the minister to cancel the appointment, which he did.

In 1903 one of Dr. Beaton's early expressed desires was met by the installation of electricity as a means of supplying light and power. Not only were the various buildings and grounds lighted thereby, but the pumps, laundry machinery (including the ironing department) and sewing machines in the seamstress' and tailor's shop were run by it.

Happily to the advantage and for the good name of the province, 1904 saw the resumption of the instruction and training of the children. As the superintendent jubilantly remarks in his report for that year:

During the summer about one-half of the children have been placed under two teachers in primary work, physical culture and manual training and it is gratifying to report that excellent results are being obtained

¹ This refers to a political organization denominated "The Patrons of Industry."

from their efforts. It is not to be expected, however, that so small a staff can accomplish all that should be aimed at in a large institution like ours. Two or three more capable instructors should be added for different industrial lines. As it is now the children are only instructed for a part of the day, classes having to alternate.

In the same and in the 1905 report the purchase of additional land was urged, the herd of cows being so large that pasturage had to be rented. As therein set forth, the area of the property consisted of only 175 acres, 40 of which were taken up by buildings and ornamental grounds, 20 by gardens, 35 by cultivated farm land, while 25 consisted of groves and bush. The remaining 55 were used as pasture. The 100 or more adjoining acres, the purchase of which was proposed, included 40 acres of valuable bush, while the whole could be brought into profitable use, the soil varying from sandy loam to clay.

On August 1, 1910, Dr. Beaton, who had capably discharged the duties of superintendent from the time of the establishment of the old asylum at Orillia, that is, for a period of over 33 years, retired from the service. On his retirement a new system of management was inaugurated, a layman, Mr. J. P. Downey, being appointed superintendent, with Dr. W. C. Herriman, previously assistant superintendent of Toronto Hospital, as medical director.

In April, 1911, a material advance was made in the development of the institution by the purchase of additional land. This included what was known as the Scott place, lying between the institution and the town of Orillia, 112 acres in extent; a portion of the Dunn property adjoining, consisting of 164 acres; and a plot of three acres at the northeastern corner of the garden. The total area of the property was thus increased to 456 acres. Further advances made during the same year were the improvement of the water supply by the utilization of a number of springs located on the Dunn property and the establishment of a well-equipped laboratory.

The urgent necessity for increased accommodation was yearly becoming more clearly apparent. The population of the institution was nearly 100 in excess of its normal capacity, while over 200 applications were on file, many of them of a deserving and distressing character. In consequence, the erection of a new cottage for women, capable of housing nearly 200 patients, was

begun in the summer of 1912 to be ready for occupancy by the autumn of 1914, while a similar building for men is to be completed this year (1915). With these additions the capacity of the institution will be increased to 1200.

Since their re-establishment the schools have continued to progress steadily onward, and the same is the case with the industrial department which has been organized. As Mr. Downey writes in his report last published, that for 1913:

More and more the value of the industrial training of the feeble-minded is borne in upon us. The field of labor in which this class can be trained to perform useful service is not so circumscribed as might at first appear. Among girls needlework is one of the most interesting and beneficial occupations. From the sewing-classes to the sewing-room, where all the knitting and seamstress work for the female side of the hospital is performed, our girls are graduated and many of them acquire a remarkable degree of neatness and thoroughness. We have girls who grade low in the mental scale and yet are capable of executing the most beautiful embroidery. Sewing as an occupation is not so popular nor so easily developed among the boys. In our tailor-shop, however, we have some lads who can make a plain garment very nicely, and they take great pride in their work. Mat making, weaving and basketry, etc., are lines of work which the feeble-minded take up very readily. Once the fingers are trained to follow a pattern or go through a series of movements the mastery of more difficult and intricate combinations can be accomplished by easy gradations.

Outside employment must take first place in the industrial economy of an institution such as ours. The boys from the construction work, from the garden, the fields, the bush and the stables are the healthiest and the most contented. They swing through their day's work in a cheerful manner and at night they are tired and happy. Holidays and the days when weather conditions prevent outside work are productive, I believe, of more trouble in the wards than all the other days of the year put together.

HOSPITAL FOR EPILEPTICS.

WOODSTOCK.

The province of Ontario, while not backward in its care of the insane and defective among its population, had made no special provision for its epileptic patients, other than that afforded by insane asylums, up to the year 1905. Many of these, although housed in the hospitals for insane, were considered not to be mentally astray. It was felt that an institution adapted to their needs, where regulated treatment, including a special dietary,

suitable employment and recreation for them could be supplied, and to which the public could be induced to send sufferers from this disorder ere actual mental disability had manifested itself, would mark a step forward in the humanitarian work of Canada's greatest province.

Accordingly, by act of the Provincial Parliament "The Hospital for Epileptics" at the City of Woodstock came into being.¹ Not unwisely the government avoided laying any great stress upon the probability of epilepsy being associated with mental defect, although sub-sections of the act set forth that no person should be received into the hospital without certificates from two medical practitioners, asserting after due examination he was an epileptic; further, such certificates were sufficient authority to any person to convey a patient to the hospital as well as to the authorities thereof to there detain him. The control of the institution was vested in the Provincial Secretary's department, and only patients resident in the province were to reap the benefits of its care. The original rate for maintenance was fixed at \$3 per week, later increased to \$3.50 by an Order in Council, this to be paid by the patient's relatives or friends where able.

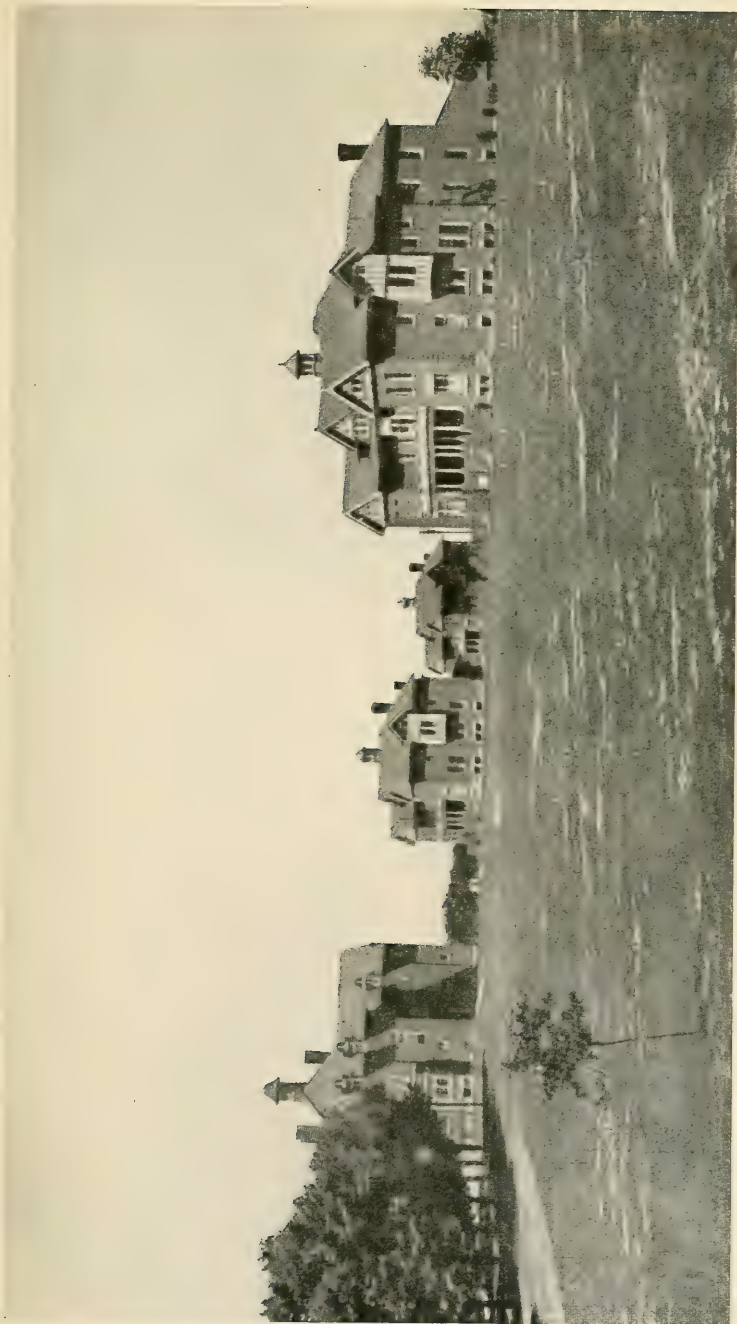
The property acquired for the new hospital, lying near Woodstock, in Oxford County, a city of 10,000 inhabitants, consisted of 100 acres, added to in 1906 by the purchase of an adjoining farm of 102 acres, and further increased in 1913 by an additional 116 acres, making the total area of the hospital land at the present time 318 acres. Fifteen acres are taken up with well-kept lawns, some 20 acres being apportioned for garden purposes, and the remainder to the farm and allied needs.

The plans for the institution comprised an administration building and a cottage on either side for male and female patients, respectively, each having accommodation for 52. The wards were opened to receive patients in 1906, the first being admitted on April 22 of that year.

In 1907 two more cottages were erected, increasing the capacity of the hospital to 166 patients all told by the year 1908.

Each cottage has its own heating plant and kitchen, while a special room in each is reserved for the physically infirm; the

¹ *Vide* acts relating to prisons, hospitals and charitable institutions, Ontario, 1914, said act being cited "The Hospitals for Epileptics Act."



COTTAGES, WOODSTOCK.

apportionment of nurses to patients is about 1 to 15, each building being provided with four day nurses and one night nurse. The nurses are given a three-years' training, leading to a diploma furnished by the provincial government on the successful completion of the course.

The lines of treatment followed in the hospital are fully abreast of the latest scientific knowledge of the disease. They include both medical and moral measures; under the former head careful examination and the therapeutics indicated, supplemented by baths of various kinds, for which there is ample equipment, together with special attention to the dieting of the patient, may be mentioned; while under the latter, congenial outdoor occupation on the farm, and in the gardens, with a judicious admixture of recreation, are some of the methods used to cure, and failing that, adequately to care for the unfortunate sufferer from epilepsy. Carpentering and work in the engineer's department also play a part as occupational features.

Dr. J. J. Williams, a graduate of Toronto University in 1893, was appointed medical superintendent of the hospital on its opening, and still remains at the head of its affairs.

At the close of the statistical year October 31, 1913, there were in residence 211 patients—105 men and 106 women.

It is interesting to observe that in the various annual reports of the institution, as made by the medical superintendent, the note struck is one of cheerfulness and optimism. Since opening nearly 50 patients have been reported as showing a most marked improvement and surcease from the epileptic attacks, the period of immunity from convulsions ranging from a few months in some cases to upwards of three years in others, this, too, where attacks occurred frequently every week prior to admission.

HOMEWOOD RETREAT.

Homewood Retreat, the first purely private asylum in the province of Ontario, and, in fact, in Canada, was founded in the City of Guelph in 1883, and opened January 1, 1884. Therefore people willing and able to pay for superior accommodation had been obliged to send their afflicted relatives to private institutions in the United States. Cognizant of this fact, a few gentle-

men, including the late Mr. J. W. Langmuir and the late Mr. E. A. Meredith (both former inspectors of asylums) organized themselves into a body corporate and, under the title of the "Homewood Retreat Association of Guelph," applied to the government for a license to maintain a "private asylum for the insane and hospital for inebriates." This was granted under the provisions of the amended act regarding private asylums.

A beautifully wooded property of 19 acres having been purchased on the outskirts of the City of Guelph, a fine stone mansion, "the Guthrie Homestead," standing thereon, was altered and added to so as to provide suitable accommodation for 50 patients, 25 of each sex. The institution was placed in charge of the late Dr. Stephen Lett, for 13 years assistant superintendent of the Malden, London and Toronto asylums, with the late and venerable Dr. Joseph Workman as consulting physician.

The institution carried on its work under Dr. Lett with varied fortunes until the fall of 1901, when the doctor had to retire owing to ill health. Thereupon the Board of Directors invited Dr. A. T. Hobbs, an 1890 graduate of Toronto University, who had been an assistant in the London Asylum for the previous 10 years, to take charge of the establishment in January, 1902.

Shortly after Dr. Hobbs' accession to office the directors, in consultation with him, decided to apply for an Order in Council to change the name of "Homewood Retreat" into that of "Homewood Sanitarium," as the trend of modern feeling demanded the abolition of the word "retreat" or "asylum" as applied to hospitals for the treatment of mental and allied ailments.

The institution, now the Homewood Sanitarium, under Dr. Hobbs' management, grew rapidly, and the board soon found it necessary to spend \$150,000 in providing increased accommodation. Two additional new and beautiful stone buildings were accordingly opened in the summer of 1907 for the reception of patients.

On January 6, 1911, owing to defective wiring in the original Guthrie Homestead, a fire took place destroying that building, together with the wards that had been added to it. Unfortunately all the early records of the institution were destroyed in the conflagration. The directors met at once and decided to erect in its stead a series of buildings of the most modern type as regards

architectural design and fittings. To carry out plans for a complete institution the ground area was increased to 50 acres, and the new buildings were ranged along the top of a hill overlooking the River Speed. As now constituted, they comprise a series of very handsome structures with all modern equipment, providing complete classification for mental, nervous and habit patients. From east to west the buildings are placed as follows:

1. Manor building for convalescent mental and habit women.
2. Administration building.
3. Manor building for convalescent mental and habit men.
4. Kitchen and dining hall.
5. Colonial building for mild mental patients.
6. Vista building for chronic mental patients.
7. Bungalow for acute mental patients.

To the dining rooms, located in the hall, access is obtained from the other buildings by covered passages. Here also is a series of studios for art and handicraft work, including leather work, metal work, basket weaving, construction work, carpentry, book-binding, etc.

The establishment has accommodation for 150 patients—70 men and 80 women—the average number of patients under treatment being 120.

The staff consists of four regular physicians, one clinical physician and 60 nurses.

By law, the "Retreat" is subject to inspection by the Inspector of Public Asylums for the province, as well as by a local board of visitors, of whom the county judge is chairman.

The insane are admitted only upon medical certificates as prescribed by statute, but inebriates and drug habitués, as well as neurotic patients, can be received upon their written voluntary application.

That the sanitarium, which is still under the superintendence of Dr. Hobbs, supplies a want in the province of Ontario, is evidenced by the many who have availed themselves of its existence, as also by the good results of its treatment.

SIMCOE HALL SANITARIUM.

BARRIE, ONT.

This sanitarium, the second purely private hospital for borderland or mild cases of mental disease to be established in the Province of Ontario, opened its doors on July 6, 1912, for the reception of patients. Its affairs are vested in a Board of Directors, of whom the medical superintendent is managing director, Mr. J. Quincy Adams being president. Well financed by a stock company, its charter is granted from the provincial government of Ontario, and it is subject to periodical inspection by the Inspector of Asylums for the province.

The building, three stories in height, with a capacity for 26 patients, and modernly equipped for the work it has to do, is situated most favorably on an elevation of land, one-third of a mile distant from Lake Simcoe, which lies some 62 miles north of the City of Toronto. Although actually within the limits of Barrie, Ont., a town of 7000 population, it lies well on the outskirts and the broad reaches of Kemperfeldt Bay, an arm of the lake, to the north, a range of hills to the west, and the well-cared for hospital grounds of some 13 acres, leave little to be desired as to scenery or situation; artesian wells are the source of its water supply.

The building is heated by hot water, and the spacious verandas and sun parlors are numerous and well arranged; a completely equipped hydrotherapeutic and electrotherapeutic apparatus is included among the aids to treatment, while outdoor and indoor recreation has been made a feature. At the end of 1914 there were 22 patients in residence.

Dr. W. C. Barber, a graduate of Toronto University, '88, for many years in the psychiatric service of Ontario hospitals for insane, and assistant superintendent at Rockwood Hospital, Kingston, for some years, is medical superintendent.

APPENDIX A.

OFFICE OF THE "BRITISH COLONIST," TORONTO,
MONDAY, AUGUST 24, 1846.

GRAND PUBLIC DEMONSTRATION ; LAYING OF THE FOUNDATION STONE
OF THE PROVINCIAL LUNATIC ASYLUM BY HIS LORDSHIP THE
CHIEF JUSTICE OF UPPER CANADA, AT TORONTO, ON SATURDAY,
THE 22D AUGUST, 1846.

The anxiety evinced by the public for the particulars of the interesting proceedings on Saturday has induced us to anticipate our regular publication and issue the present extra to our city subscribers.

The morning of Saturday was dull and unpromising for the ceremony appointed for half past two ; towards noon, however, the sun's gladdening beams brightened all around and before the appointed hour a large concourse of people were gathered at the rendezvous—the old Government House. Shortly after 3, Mr. Denison having completed his arrangements in marshaling the several bodies, the procession moved towards the site of the building in the following order :

PROGRAMME.

Two Policemen,
Band of the 81st Regiment,
Fire Companies (in their own order, Juniors first),
St. George's Society,
St. Patrick's Society,
Magistrates and Sheriff,
Municipal Council and Warden of the Home District,
Corporation and Mayor of the City of Toronto,
Builder, Architect, and Clerk of Works,
The Chief Justice,
Commissioners and Secretary,
The Clergy,
Judges of the Court of Queen's Bench and Members of the Bar,
Members of the Medical Profession,
Odd Fellows' Society,
Inhabitants,
Two Policemen,
Marshal, Richard L. Denison, Esquire.

On the route, the splendid band of the 81st Regiment performed some of the most spirit-stirring airs.

The several national societies were attended by their standard bearers, as were the members of the Odd Fellows' Society.

His Lordship the Chief Justice having arrived at the stone, at the northeastern angle of the buildings, and being surrounded by the mayor, the judges, the commissioners, the sheriff's deputy, R. Beard, Esq., Mr. J. G. Howard then placed in a cavity beneath the stone a copy of Rowsell's Almanac for 1846, Brown's City Directory, a copy of the last issue of the *British Colonist* and each of the other city journals; 1 sovereign, 1 half sovereign, 1 crown, a half crown, a shilling, a sixpence, a groat, and one penny and a half penny of Victoria's reign; two old penny pieces, an old shilling of the reigns of George II and George III, a written account of the last examination at Upper Canada College, and two lithographic views of the old school house at Cornwall, placing over all a plate, on which was inscribed:

THIS CORNER STONE

Of the first building erected in Western Canada for the reception of

INSANE AND LUNATIC PERSONS,

Under the direction and Superintendence of

The Honourable Robert Sympson Jameson,
Vice Chancellor,

Hamilton Hartley Killaly, Esquire,

Henry Sherwood, Esquire, Q. C., M. P. P.,

The Honourable Christopher Widmer, Surgeon,

John King, M. D., Professor of Medicine

University of King's College, Toronto;

John Ewart, Esquire,

James Grant Chewitt, Esquire,

William Henry Boulton, Esquire, M. P. P.,

Mayor of the City of Toronto,

William R. Beaumont, Esq., F. R. C. S. E., etc.,

Professor of Surgery,

University of King's College, Toronto,

William Botsford Jarvis, Esquire, sheriff of the

Home District,

Commissioners appointed for the purpose by

His Excellency the Right Honourable

CHARLES THEOPHILUS, BARON METCALFE,

then Governor-General of the Province,

Under the provisions of an Act of the Legislature

of the Province of Upper Canada,

passed in the second year of the reign of

HER MOST GRACIOUS MAJESTY QUEEN VICTORIA,

was laid by

The Honourable John Beverley Robinson,
Chief Justice of the Province of Upper Canada,
in the presence of

The Clergy,

The Judges and Bar of the Province,
The Members of the Medical Profession,
The Mayor and Corporation of the City of Toronto,
The Sheriff, Magistrates, Warden and Municipal

Council of the Home District,

The National Societies of
St. George, St. Andrew and St. Patrick,

The Odd Fellows' Society,
The Volunteer Fire Companies,

and

The Inhabitants of Toronto Generally,
on the

22nd. day of August, in the year of our Lord,
1846;

And the Tenth year of the Reign of
Her Most Gracious Majesty,

QUEEN VICTORIA;

His Excellency Lieutenant-General the Right Hon.

CHARLES MURRAY EARL CATHCART,

being

Governor-General of British North America,
and Commander of the Forces therein.

The plan and elevations of the building,
prepared by

John G. Howard, Esquire, Architect,
were, after mature deliberation and great care for
the health, comfort, security and restoration
under Divine Providence

of the unfortunate beings for whom
this Asylum is erected

adopted by the Commissioners and carried into
effect upon this site of fifty acres of land,
munificently granted by

Her Majesty's Government
for this humane purpose.

Builder,

Mr. John Ritchey.

Secretary to the Commissioners,

Charles Daly.

Marshal of the day, Richard L. Denison, Esq.

Mr. Howard then presented His Lordship with a splendid silver trowel, manufactured by our townsman, Mr. J. G. Joseph, bearing the following inscription :

Presented to
THE HONOURABLE CHIEF JUSTICE ROBINSON
on his laying the corner stone of the
Provincial Lunatic Asylum, Toronto,
by
The Hon. R. S. Jameson, Vice Chancellor,
Hamilton H. Killaly, Esq., Commissioner Board
of Works,
Henry Sherwood, Esq., Q. C., M. P. P.,
The Hon. C. Widmer, Surgeon,
John King, M. D., Professor of Medicine, King's
College, Toronto,
John Ewart, Esquire,
James G. Chewitt, Esq.,
William H. Boulton, Esq., M. P. P., Mayor of the
City of Toronto,
William R. Beaumont, Esq., F. R. C. S. E., Professor
of Surgery, King's College, Toronto,
William B. Jarvis, Esq., Sheriff, H. D.,
Commissioners for erecting the building,
John G. Howard, Esq., being the Architect;
Mr. John Ritchey, the Builder;
Charles Daly, Esq., Secretary to the Commissioner.
Toronto, August 22nd,
1846.

THE CARE OF THE INSANE IN PRINCE EDWARD ISLAND.

FALCONWOOD HOSPITAL.¹

Prince Edward Island was in all probability sighted by Cabot in 1497, but really discovered by Cartier in 1534, and named by him Isle St. Jean. It was settled by the French about 1719, but ceded by France to Great Britain in 1763.

In 1769 the island became a separate British colony, but its first legislative assembly was not convened until July 7, 1773.

By an act of the Legislature, passed in 1799, the name of the island was changed to that it now bears, the reason assigned for the change being that three St. Johns in such close proximity, viz., St. John, N. B., St. John Island, and St. John's, Newfoundland, gave rise to mistakes and inconvenience in postal matters, etc.

In the earlier years no reference is found in regard to lunatic persons or paupers, or to any appropriations from the public funds toward their maintenance or safekeeping. By the year 1820, however, small amounts were granted to some specially needy cases. In 1828 the report of the Public Accounts Committee shows that the sum of £118, 19s. and 4d. (then no small part of the revenue) had been spent in support of lunatics and other indigent persons during the previous year.

The first attempt to deal in a general and adequate manner with the care and protection of the insane is found in the following resolution of the House of Assembly, adopted April 9, 1831. On motion of Mr. Owen (one of the members for Queen's County), it was

Resolved, That it be referred to a select committee to inquire into the expediency of making legislative provision for the care of insane persons, and to report their opinion as to the best mode of carrying that object into effect.

It was ordered that Messrs. Cameron, Owen, J. S. Macdonald, Green and Compton be a committee for that purpose. Mr.

¹We are indebted for this sketch of the care of the insane in Prince Edward Island and of its hospital therefor, almost in its entirety, to A. D. Fraser, Librarian of Parliament, Charlottetown, P. E. I.

Cameron, chairman of the committee, on April 12 presented the following report:

Your committee having under consideration the matter referred to them by the House relative to making a permanent provision for the care of lunatics, and also the impotent poor, beg leave to report that, having duly considered the melancholy situation of such unfortunate persons and the great expenses likely to be entailed on the public by providing separately for persons so situated, they conceive that the cheapest and most efficient mode of supporting them would be by placing a certain sum of money at the disposal of His Excellency the Lieutenant-Governor, for the purpose of providing a place, under fixed and proper regulations, for their care and maintenance. And that also, in the event of such insane persons being possessed of any property, such property should be made available for the reimbursement of any sums that may be expended for their support, or at least that it should be made to contribute toward the same.

Your committee would further beg leave to suggest that when the new jail is completed the old jail might at a small expense be fitted up for the purpose herein recommended.

It was ordered that the report "do lie on the table"; and lie on the table it did, for no further reference is found to the matter till attention was called to it in the following rather evasive paragraph, in the Governor's speech at the opening of the session of 1837:

There is another public building of importance scarcely secondary to any other, the erection and endowment of which must, however, I apprehend, be deferred until the resources of the colony are more fully developed—I mean a provincial hospital or infirmary, including within it a lunatic asylum.

In the following year, on March 8, Mr. Pope moved that the House "do come to a resolution as followeth":

Whereas this House, taking into consideration the numerous cases of insane and infirm persons in various parts of the island, many of whom are supported by special grants of money from this House to the amount of upwards of £250 per annum, is forcibly impressed with the great necessity that exists for making a more suitable provision for ameliorating the condition of such unfortunate individuals, and sincerely regrets that the very limited means at its disposal do not enable it to found an establishment for the care and safekeeping of these unhappy persons, as the cause of humanity and feelings of sympathy for our fellow creatures, suffering under affliction, would dictate. But the House having learned that a sum amounting to £800, or thereabouts, has lately been realized from the sale of Crown lands in this island, no part of which has yet been appropriated, and believing that this fund is likely to be augmented by future sales;

Resolved, therefore, That an humble address be presented to His Excellency the Lieutenant-Governor, praying that he will be pleased to use his

influence with Her Majesty's government to obtain permission to apply such portion of the said funds as may be sufficient to erect a building for a lunatic asylum and house of industry.

This resolution, slightly amended, was adopted, and a committee was appointed to prepare and report the draught of an address to His Excellency on the subject.

In the address, which was approved by the House, the committee assured His Excellency that, "should such a sum be applied to those benevolent purposes, the future management of such institution would be cheerfully provided for by the colony."

The Governor assured the committee that he would exert his influence to obtain the object desired by the address, and accordingly submitted the application of the House to Her Majesty's government. A reply came in due course that the Lords Commissioners of the Treasury would not be unwilling to allow the expenditure on this work of a part of the £800 arising from the sale of lands, provided they were furnished with a specific estimate of the sum required.

This favorable reply was transmitted to the House, and His Excellency was thereupon requested to have plans and estimates prepared and forwarded to the Lords of the Treasury, with the request that out of the sales of lands, which now amounted to £1200, and which might reasonably be expected to increase to £5000 by future sales, the sum of £1500 might be applied to the said building, this being the lowest estimate of the cost of a suitable structure.

The Governor, Sir Charles Augustus Fitz-Roy, having forwarded this application, had pleasure in informing the House, early in the session of 1840, that the request had been acceded to.

Accordingly, an act was passed during that session "to authorize the erection of a building near Charlottetown as an asylum for insane persons and other objects of charity, and to provide for the future maintenance of the same." The cost of land, which was to comprise an area of from 20 to 50 acres, was not to exceed £500, while the cost of the building to be erected thereon was not to exceed £1500. The annual sum of £350 was allotted for the upkeep of the establishment.

This act¹ provided that it should be lawful "for the administrator of the government, by and with the advice of Her Majesty's

¹ Third Vict., Cap. 21.

Council, to nominate and appoint two members of the Legislative Council, and the House of Assembly shall select and choose five of their members, who shall continue in office during the existence of the said House, of whom one shall be from each county, who, together with the Chief Justice, the President of the Legislative Council, and the Speaker of the House of Assembly, and their successors in office, shall be trustees."

This peculiar provision was intended to give the popular chamber a larger representation on the trustee board of the institution than it was likely to have if the appointments were made in the usual way.

The bill was passed subject to this proviso: "That nothing in this act contained shall have any force or effect until Her Majesty's pleasure thereon shall be signified."

Early in the following session the Lieutenant-Governor laid before the House of Assembly a copy of a dispatch from Lord John Russell, Secretary of State for the Colonies, which, after referring to the manner in which the trustees of the asylum were to be appointed, set forth as follows: "Her Majesty's government cannot be a party to encroachments of this kind on the rules which should separate from each other the functions of the executive government and those of the legislative bodies."

It was thereupon resolved that a committee should be appointed to prepare and bring in a bill to amend the act of the previous session, in conformity with the dispatch of Lord Russell, dated the 13th of October, 1840.

Mr. Rae moved an amendment to the proposed resolution that after the word "Resolved" all should be struck out, and the following substituted:

That in the present state of the colony this House cannot accede to the restrictions imposed on the representative body by Lord John Russell in regard to their curatorial powers over the intended house of industry and lunatic asylum; and therefore, with deep regret, they are obliged, for the present, to desist from further prosecuting that important public undertaking.

The House divided on the amendment, the vote standing 14 in favor of it to 7 against. Thus the erection of a home for the insane was indefinitely postponed.

The foregoing furnishes a good illustration of the contest that was going on in the colony during those years for "responsible government."

In his speech at the opening of the next (1842) session, His Excellency expressed an earnest hope that the project to provide an asylum for the insane, so long contemplated, would be completed; "for," said he, "I will not believe it possible that you will continue to withhold so necessary a shelter for this afflicted class of our fellow creatures, towards which our gracious sovereign has so readily and largely contributed.

A committee was accordingly appointed by the House to report upon the probable yearly expense for the maintenance of a lunatic asylum and other matters connected therewith, and, in due course, reported that in the year 1839 the House of Assembly had voted £309 toward the support (or partial support) of 47 insane and indigent persons; in 1840, £356 for 60, and in 1841, £531 for 73. According to the census of the last-named year, there were on the island 78 insane, 30 deaf and dumb, and 29 blind persons.

The committee estimated the annual expense of maintaining an institution, with an average of 20 patients, at £513, and recommended to the House the expediency of reconsidering their action of the previous session, with a view to removing the objection complained of by the home government, thus rendering available the £1500 allowed by Her Majesty to be appropriated out of the Crown land monies for the erection of the building.

A bill¹ to this effect was introduced, leaving the appointment of the trustees to the Governor in Council, but requiring that five of the seven trustees should be members of the House of Assembly. At the third reading of the bill, however, the latter clause was changed to three out of seven, and so it was passed.

It might be thought that now all difficulties had been removed, and that the work of construction would have been taken up at once, but the act of 1840 imposed another impediment; it called for a tract of land in connection with the asylum of not less than 20 acres in or near the common of Charlottetown.

The government sought to secure such a site suitable for the purpose, first out of some unsold Crown lands, then by purchase, but failed in both instances.

¹ Fifth Vict., Cap. 15.

So two more years passed and no progress could be reported. In consequence, during the session of 1844, with the consent of Her Majesty's government, an alteration was made in the original act, by which the minimum of 20 acres was reduced to ten.¹

A site was at last secured, consisting of a plot of ten acres, located at Brighton, on York River, about one and a quarter miles from Charlottetown. A contract was let and active operations were soon under way, the pleasing information being received from the Secretary of State that a further sum would be appropriated out of the Crown lands sales in addition to the £1500 previously granted.

About this time a suggestion came from the Assembly of New Brunswick that the three maritime provinces should consider the propriety of co-operating in the erecting of a joint asylum for their insane, and the following is an extract from a resolution passed by the Assembly in response to this suggestion:

Resolved, That this House will readily co-operate with the other branches of the Legislature in any measure calculated to meet the concurrence of the Legislatures of New Brunswick and Nova Scotia, whereby the lunatic asylum now in course of erection near Charlottetown may be adapted to serve for these provinces, as well as for this island, and by which any equitable arrangement may be made for apportioning the expense and yearly maintenance of the said establishment.

Nothing further came of this ambitious scheme to domicile the insane of the three provinces under one roof, and it was but a short time before the new structure became quite inadequate to meet the requirements of the island alone.

The institution so long contemplated and so long under discussion, the progress of which had so often been delayed, was at last an accomplished fact. In opening the session of 1846 Sir Henry Vere Huntley was able to say:

The lunatic asylum and house of industry, although not quite finished, is in a sufficiently complete state to be used for the purpose for which it has been erected. I hope, therefore, some material change will be made in the present objectionable system of affording relief to the destitute.

At this session the sum of £315 was voted for maintenance during the current year.

The newly born structure was of brick, capable of accommodating about 20 inmates without using the basement cells.

¹ Seventh Vict., Cap. 20.

It was enlarged by the addition of wooden wings in 1867 and 1874, and then could house, without crowding, 42 patients, though in later years over 80 were sometimes given refuge.

The administration of its affairs was vested in a board composed of the following gentlemen: The Chief Justice, Edward Jarvis; the President of the Legislative Council, Robert (afterwards Sir Robert) Hodgson; Edward Palmer, Charles Hensley, William Swabey, Thomas Pethick, Joseph Wightman and John Longworth.

At the first meeting of the board, held April 2, 1846, it was resolved that an advertisement should be inserted in the newspapers for parties qualified to fill the several positions of medical officer, master and matron. At the next subsequent meeting, Dr. John Mackieson was appointed visiting medical officer at a salary of £25 currency per annum, to be paid extra for all drugs supplied for the use of the patients, and Sergeant Samuel W. Mitchell and wife were made master and matron.

The first order for admission was given by the board May 1, 1847, when eight patients were directed to be received. On June 14, 1847, following, however, only a month and a half after their reception, these unfortunates were ordered to be discharged and the asylum was taken over by the government to be used as a hospital for some immigrants, who had arrived in the barque *Lady Constable*, and were suffering from typhus fever. On the 28th of January, 1848, the Executive Council restored the asylum to the care of the trustees, and on the 26th of June of that year it was again opened for its original purposes by the admission of five lunatics and five paupers.

At first the master received a certain sum per head for the inmates under his care. The amount paid him varied from eight shillings and two pence to ten shillings per week, and included every expense connected with their maintenance except the salaries of himself, the matron, and the medical officer, plus the cost of drugs supplied by the last named.¹ After a trial of four years this method did not prove satisfactory to the trustees; the supplies, therefore, were ordered to be obtained by tender. In the early days, too, the medical officer visited the institution but

¹ Annual report of the medical superintendent of the lunatic asylum, Charlottetown, P. E. I., for the year 1878, p. 9.

once or twice a week, and the master and matron did all the household work without the aid of servants or attendants, depending solely upon the help obtainable from the patients or paupers.

¹ From 1847, when it was first opened, until 1869, the building was used for an asylum and a poorhouse, but in the latter year it was found too small for the combined occupancy, and the paupers were removed to an old military barrack situated about half a mile distant.

During the 32 years in which it served as a domicile for the insane of the colony, the original institution, no doubt, accomplished much good, although from the first hampered by want of funds and lack of room. From its opening, in 1847 until, in 1879, it gave place to the present hospital, at Falconwood, no fewer than 421 insane patients had been admitted, of whom 269 had been discharged recovered or improved, almost 64 per cent, and 74 had died.

From time to time the medical officer recommended improvements, which were generally rather sparingly adopted, or rather tardily carried into effect. Overcrowding was the great menace

¹ In 1858 an important amendment to the lunacy laws was made by the passing of an act, 21st Vict., Cap. 14, the preamble to which reads as follows: "Whereas, persons charged with high treason, murder or felony, may be of unsound mind at the time of committing the offences wherewith they shall be charged, and by reason of such insanity may be found not guilty of such offences, and it may be dangerous to permit persons so acquitted to go at large; be it therefore enacted, by the Lieutenant-Governor, Council and Assembly, as follows." By this amendment such persons were ordered to be kept in strict custody during the pleasure of the Lieutenant-Governor in Council, the act being also made retroactive so as to apply to those already in custody for such offences. It was furthermore enacted that persons unable to be tried on the ground of insanity should also be placed in safekeeping on the same terms, and that any party discovered and apprehended under circumstances denoting a derangement of mind and a purpose of committing some crime was liable to be brought before two justices of the peace, who should call to their assistance a physician or surgeon. If the said justices were satisfied that the individual was insane, or a dangerous idiot, it should be lawful for them to commit such person to jail to be held until discharged by the order of two justices of the peace, one of whom should be one of those who signed the warrant of commitment, or a judge of the Supreme Court, or until removed by order of the Lieutenant-Governor in Council to a proper lunatic asylum, or to the custody of guardians.

to the proper conduct of the institution and the efficient treatment of its inmates, and his report for 1864 contains the following paragraph:

We continue to suffer the disadvantages connected with a building most faulty in its original construction and limited in its dimensions, and it is no trifling grievance to find that while the other provinces have created palatial structures for their insane, and continue every few years to expend thousands in their amplification, we must find accommodation for our sufferers underground.

Again, in his reports for 1867, '68, and '69, he calls appealingly for more room, stating in the latter year, "We have been obliged to crowd 16 male lunatics together in one sitting-room of ordinary dimensions." Yet again, in 1871, there is the same complaint of lack of room and consequent overcrowding, many patients being quartered in the county jail awaiting their turn for admission.

The medical officer had now reached an advanced age, the master and matron were not well qualified to cope with the difficult task that confronted them, and the trustees in later years had given a rather perfunctory attention to the important duties of their office. The grand jury also, in their semi-annual visits, relied too much upon the representations of the keepers instead of making a thorough investigation for themselves. At length, however, the last-named body, after a visit paid on January 14, 1874, made this presentment:

We are of opinion that this building is entirely too small for the requirements of the colony. In evidence of this, we found the ventilation very insufficient, and also two female patients in one ward (room), which we conceive to be prejudicial to their recovery, and from information we have received from Mr. Gidley, the superintendent, we think no time should be lost in bringing it to the notice of the government.

This paved the way for a scathing denunciation contained in the report of the grand jury at the opening of the Trinity Term for the same year, of which the following is a copy:

The grand jury feel it to be their duty to bring to the notice of your Lordships the state of the lunatic asylum of this province.

On Thursday, the 2d of July, inst., they formally visited the asylum, and as it was a fine afternoon, most of the inmates were out of doors. The institution was seen under exceptionally favorable circumstances, for many of the windows and doors were opened, upstairs and down, and yet the grand jury find it difficult to ask your Lordships to believe that an institution so conducted would be allowed to exist in a civilized community. In

a cell below the ground, about six by seven feet, they found a young woman entirely naked, beneath some broken, dirty straw. The stench was unbearable. There were pools of urine on the floor, evidently the accumulation of many days, as there were gallons of it. The poor creature endeavored to hide herself in the filthy straw, and although the keeper alleged, as an excuse for her condition, that she was violent, the only article she had upon her was a rag tied closely around her neck, with which she could easily have strangled herself had she been as violent as she was alleged to be.

In another cell, about the same size, another young woman was closely confined.

The stench was so unbearable that none of the jurors could remain there longer than a few seconds. In this cell there was not even the dirty straw, but the poor creature lay upon the bare boards in a state of filth which was sickening.

In another cell, on the same level, and of the same dimensions, 6 x 7 feet, they found an elderly woman; but common decency restrains the grand jury from giving the details of what they witnessed.

The whole asylum is in one state of filth; men's rooms and women's exhibit an utter absence of the slightest attempt at cleanliness, while the stench was such that some of the jury were ill for hours after inhaling it.

The sufferings of these poor people, on the sultry nights of summer and in stormy weather, when the doors are necessarily closed, must far exceed all that we have been told of the Black Hole of Calcutta. There are stains of urine on the floor so large as to show that it must have been allowed to accumulate, while the beds and bedding are, with hardly any exception, so abominably filthy that, if they be not alive with vermin, it is because vermin could not exist in such an atmosphere as surrounds them.

The grand jury desire to inform your Lordships that the cases which they have referred to by no means exhaust the revolting sights which they witnessed, but they mention them because they think that, while there can be no possible reason for the close confinement of the poor and apparently harmless creatures, there is certainly no excuse whatever for their filthy and horrible condition. The keeper of the asylum is an ordinary laborer, who relinquished the occupation of joiner for his present position, and the grand jury fail to see that an utter want of training, joined to a singular absence of moral competence, is any fitness for the responsible position which he occupies.

The grand jury think it right to inform your Lordships that the keeper showed an evident unwillingness to allow them to see the victims specially herein mentioned, as well as others of more distressing cases; and in every case, where this unwillingness was manifested, and the reason of their extreme violence given for such unwillingness, we found apparently harmless creatures, in some instances suggesting the probability of their being the victims of violence, rather than of their being violent.

The men's side of the house corresponds with the women's side, except that there are more women confined in underground cells than there are men.

The grand jury feel that they cannot, within the limits of a formal presentment, adequately convey to your Lordships any idea of the terrible state of the lunatic asylum; nothing but a personal inspection would do that. But they do not think they can discharge their duties without formally presenting it. It is the feeling of every juror that he would rather see any friend of his die and be buried than to be condemned to a living death in that asylum. We know of no crime so great as to be deserving of a punishment so terrible as to be incarcerated in one of its underground cells. The grand jury, last Hilary Term, made a presentment similar to this, but without any effect; but we cannot but think the responsibility rests somewhere; either with the local government or the trustees or the medical attendant or the keeper; some one or all of these must be responsible for this terrible state of things; and as presentments of the grand jury upon this subject are treated with an indifference which we think they do not deserve, we beg respectfully to ask your Lordships where the actual responsibility really lies, and if it be competent in us to prefer an indictment against the guilty parties, in order not only that punishment may be awarded where it is so justly deserved, but that the unfortunate creatures of whom we have been speaking may be rescued from their deplorable condition, and this Province of Prince Edward Island be relieved from the foul and shameful disgrace which now rests upon it.

In behalf of self and fellows,

(Sgd.) J. S. CARVELL, *Foreman*.

Naturally, this presentment made a profound sensation. The medical officer and master were both indicted for what was called "the horrible abuse of the patients"; the whole province was thrown into an uproar, and the home government sent a remonstrance to that of the island in the matter. The immediate result was a change in management, the services of the officers indicted being dispensed with, and Dr. Mackieson succeeded in office, after a period of over 28 years, by Dr. Edward S. Blanchard, who assumed duty in August, 1874. At the same time a vacancy occurring by resignation on the Board of Trustees, Jedediah Carvell (afterwards Governor), who acted as foreman of the grand jury that had made the presentment, was appointed to the board.

It should in justice to the medical officer and successive Boards of Trustees be here recalled how repeatedly their reports had called attention to the inadequate accommodation and consequent impossibility of avoiding overcrowding and the utilization of the underground cells.

While the immediate consequence of the furor aroused was a change of officials and a change of conditions as far as circum-

stances would admit, the great result was the impetus it gave to a movement, slowly gaining ground, in favor of providing a suitable and up-to-date institution for the housing of the insane. The movement thus started led to the passage in 1877 of a new lunacy act¹ providing for the erection of the "Prince Edward Island Hospital for the Insane," the abolishing of the office of visiting medical officer, and the creation of that of medical superintendent in its stead; the new official to reside on the premises and to devote his whole time to the welfare of the institution. By the same act the Board of Trustees was reduced in number to five members, who were to meet quarterly at the hospital, or oftener, there or elsewhere, if circumstances required; one of them to visit the hospital once a week.

As a site for the establishment, about 100 acres of land were appropriated on the north bank of the Hillsborough River at a distance of about three miles from Charlottetown, and four and a half miles from the old asylum. It formed a part of a tract of government land known as the Stock Farm, at Falconwood, in the Royalty of Charlottetown.

Some considerable time was necessarily and very properly spent in procuring the fullest possible information regarding hospital plans and construction. Dr. Blanchard was untiring in his efforts to secure the best advice and availed himself of the co-operation of Dr. Walker, of the Boston Lunatic Asylum, a gentleman peculiarly fitted from his long experience to make choice of plans embodying all necessary requirements. Plans were advertised for and eleven designs were received from architects in various parts of Canada and the United States. Those of Stirling & Dewar, of Halifax, were decided upon as the best, but even they had many defects, which, however, were remedied by the suggestions of Drs. Walker and Blanchard.

Tenders were called for, those of MacIntosh & Dewar being accepted, and construction was begun on June 5, 1877, brick and stone being the materials selected. By August, 1879, a portion of the edifice, consisting of a center building and west wing, was completed and ready for occupation.

The contract called for a central block and tower, 52 feet by 154 feet, with a wing on the west side 45 feet by 221 feet, the

¹ Thirty-eighth Vict., Cap. 4.

structure to be four stories in height, not including the basement, which had a height of 8 clear feet. It afforded accommodation for 150 patients and was so designed that its architectural appearance would be improved by the addition of further wings, which would bring its capacity up to 400. The cost of the portion completed was in the neighborhood of \$106,000.

It had been intended that the hospital should be provided with gas, but, as no grant was made for that purpose, the building was lighted with kerosene oil, the danger arising from which system of illumination was frequently pointed out by Dr. Blanchard.

The 10th of December, 1879, marked an important era in the history of the care of the insane in Prince Edward Island, for on that day the entire household was transferred from the old asylum to the new. The said household at this time consisted of 86 patients, the medical superintendent, a supervisor, a matron, an engineer, a fireman, a farmer, seven attendants and four servants.

In his annual report for the following year, the medical superintendent remarks upon the great benefit following the removal to the new hospital; the great improvement in the demeanor of the patients; the wonderful diminution in the noise and excitement so painfully and constantly present in the old quarters, and chiefly due to the overcrowding so terribly prevalent in former days.

At the time of the erection of the new asylum there was no little objection raised to building on so large a scale and imposing such a burden upon the province. The conduct of the government was, however, fully vindicated by the fact that only one year after its occupation the superintendent speaks of the female wards as fast becoming overcrowded, the three wards devoted to females, intended to comfortably accommodate 40 patients, being obliged to house 55.

During the same year an investigation was held into a case of aggravated assault made upon one of the male patients¹ by some of the attendants. As a result they were brought to trial and on

¹ In 1904 this man committed a homicide while still in the asylum, the deed being the outcome of a delusion that the Saviour was present, and that there was a plot to take His power from Him, and if the plotters were not destroyed the world would be lost.

the testimony of one of their number, who turned Queen's evidence, two of them were sentenced to imprisonment in the penitentiary at hard labor for lengthened periods, and another to confinement in the county jail for a shorter time. As a result of this, feeling ran high, and so many false reports were concocted and circulated that the Government appointed a commission, under the "Public Inquiries Act," to inquire into the whole management of the hospital. The commission, composed of Rev. Geo. W. Hodgson, A. A. MacDonald and Chas. C. Gardner, made an investigation lasting for nearly three weeks, during which time 47 witnesses were examined. In their report to the government, the commissioners stated that, in their opinion, the asylum was, upon the whole, carefully and efficiently managed, that all those then employed were competent and diligent in the performance of their duties, and that there was no evidence to support the serious charges made.

For the next nine years there was nothing out of the ordinary to report; there were each year about the usual average of discharges and deaths, plus the annual call of the superintendent for more accommodation.

In 1889 the building had become so overcrowded that the Executive Council decided to utilize the rooms occupied by the medical superintendent for female patients' quarters. That officer was again, accordingly, made a visiting instead of a resident one, after which, as was to be expected from such a retrograde movement, the annual percentage of recoveries began to decrease.¹

This was attributed mainly to the fact that the medical officer lived at a distance from the hospital (in Charlottetown), and that a daily visit was quite inadequate to do justice to his charges, more especially acute cases, from which recoveries are almost entirely obtainable.

It was not intended, though, that this change of system should be permanent, and, at the time it was made, plans had already been drawn for the erection of a residence for the superintendent upon the hospital grounds. The work, however, was delayed from time to time; then came a change in the ministry, and nothing has yet been done towards this end so much to be desired.

¹ Annual report of the trustees and medical superintendent of the Prince Edward Island Hospital for the Insane for the year 1896, p. 16.

Early in 1900 Dr. Blanchard retired, after having discharged the duties of medical superintendent for over 25 years. In his last report he gives this brief résumé of the operations of the institution while under his charge :

The best years of my life have been devoted to the task of carrying out, as far as in me lay, the object for which the institution was established, and I can truthfully say that no effort on my part has ever been spared to ameliorate the sad condition of those for whose care I have been responsible. When the management of the old asylum was placed in my hands, the names of about 65 patients were on the record book. Only 15 of these are now remaining, but more than 900 have been under my care. Of that number, over 300 have been discharged (recovered) to again take up the burden of life, and about 200 have gone to that bourne whence no traveller returns. But one suicide has taken place and no death has been caused by accident during the more than a quarter of a century of my incumbency. Our record in this particular cannot be equalled by any institution of a similar kind on the continent.

Upon the retirement of Dr. Blanchard, Dr. V. L. Goodwill, the present efficient medical superintendent, assumed charge of the establishment, with residence in the hospital. Under his management many changes have been introduced, such as a training school for nurses, increased employment for patients, and almost complete freedom from restraint.

In 1901 a portion of the east wing, a contract for which had been let as far back as 1896, and which had been under construction for some time, was completed, and gave much relief to the crowded condition of the institution.

In 1903 a further portion of the government stock farm, comprising about 50 acres, was turned over to the asylum, this addition being further supplemented in 1910 by the bestowal of the balance of the farm, making the total area of the hospital property about 370 acres. The former year also saw the resignation of Wm. MacPhail, after a long and faithful service of over 20 years, at first as supervisor and later as bursar.

The year 1906 witnessed the installation of an electric lighting plant, several minor but important improvements being also effected.

What is now named "The Provincial Infirmary," but known in the act, 7th Edward VII, Cap. 13, as a poorhouse, having been erected on the asylum grounds, and placed by the said act under the same medical supervision, was opened in 1909. Its

capacity is 100, and to it can be transferred from the hospital proper, idiots, imbeciles and demented suitable for residence therein, provision being made for their re-transfer to the hospital by the superintendent if deemed necessary. This backward step is to be regretted, the housing together of lunatics, no matter what their mental status, and paupers being a return to a plan generally abandoned nearly 50 years ago, and denounced by nearly all good authorities.

By an act¹ passed in April, 1911, the name "Prince Edward Island Hospital for the Insane" was changed to "Falconwood Hospital," its present title. By the same act the voluntary admission of private patients competent to make application is allowed, such persons not to be detained more than six days after having given written notice of their wish to leave.

In 1912 provision was made for the segregation of tubercular patients by the remodeling of an unused building on the old stock farm into a cottage hospital fitted out with all modern conveniences. It consists of a kitchen, two bath-rooms, three sun-porches, one dormitory for six beds, and eight smaller rooms, the total accommodation being for 20 patients. The building, which measures 40 feet by 42 feet, is heated by means of a fireplace, two hard coal stoves, and an improvised hot-air system for the bath-rooms. Ventilation is provided for by means of air-shafts constructed in the chimneys, with a new model air inlet in the windows.

The population of Falconwood at the close of 1913 was 268, the nominal capacity being about 275. The whole of the medical work falls on the shoulders of Dr. Goodwill, the medical superintendent never having been allowed an assistant.

¹ First George V, Cap. 9.

THE CARE OF THE INSANE IN SASKATCHEWAN.

Saskatchewan, like its sister province Alberta, assumed a distinct personality on September 1, 1905. It had formerly been included in that vast tract of country designated in Canada the North West Territory, as a portion of which its insane had been cared for in the asylums of Manitoba; this by special enactment of the Dominion Government, the agreement being that the rate paid to the provincial institutions should be \$1 per caput per day.

Upon the establishment of Saskatchewan as a separately controlled province—this owing in great measure to the rapid increase in its population—some method of looking after its insane, more in keeping with its liberation from swaddling clothes, was readily recognized by the newly formed Provincial Executive. The building of a hospital for the care of its mentally afflicted, who were then being paid for in Manitoban hospitals, as well as the care of cases which might develop in after years, was foreshadowed in the Legislature through the passing of an act in 1906, known as the "Attorney-General's Act."¹ This placed in the Attorney-General's department the superintendence of prisons, asylums, houses of correction and other places of confinement within the province, also the inspection of all certificates bearing upon the admission and discharge of lunatics to and from asylums. To the Department of Public Works by this act was deputed the construction, charge and direction of all such government buildings.

By the legislation known as "The Insanity Act,"² in 1906 the province provided that anyone deemed to be mentally awry could be taken to a justice of the peace who might, did the evidence show sufficient reason, send such a one to the nearest jail, there to stay till the Attorney-General ordered his removal to an asylum in Saskatchewan or another province, where he should remain until discharged by law. This procedure could be appealed against by any friend or relative of a patient who might lodge

¹ Revised Statutes of Saskatchewan, 1909.

² Statutes of Saskatchewan, 1906, Cap. 22, Sec. 1.

an objection before a judge of the supreme court if done within four days, whereupon said judiciary was empowered to examine said patient, hear evidence, and then decide whether the person in question was a lunatic needing confinement or not. The maintenance of all pauper lunatics was made a provincial burden by the same enactment, but Indians might not be sent to an asylum unless their upkeep was guaranteed by the Dominion Government, whose wards they were, through its Superintendent General of Indian Affairs.

Although this legislation in 1906 enabled the province to take steps toward the selection of a site, the acquirement of land and the construction of a hospital for the insane, beyond a limited desultory discussion in the Provincial House of Assembly nothing practical was done till 1911 with regard to providing an institution for the Saskatchewan insane. Dr. David Low, of Regina, a member of the Legislature, had, in 1907, been commissioned to journey East, and there in certain of the Canadian provinces and the United States to spend some time in investigating their methods of housing and caring for patients afflicted with mental disorder. This he did, and not a few of the recommendations which he made were used when the constructional features of the new hospital were in the planning.

The location of the hospital was, by the legislative body of Saskatchewan, finally settled to be at a point two and a half miles from the town of Battleford, and some three miles from the city of North Battleford, the latter a progressive center of population, on the Canadian Northern Railway. About half a mile from the point selected the Battle River joins the Saskatchewan, the site of the building lying some 500 yards from the bank of the latter stream, and, owing to its slight elevation, commanding a fine view of the junction of these two bodies of water. It is a healthful and fairly central district, and the 2480 acres of land which comprise the hospital property seem more than ample, even in a country where prodigality in acreage is the rule, rather than the exception.

In August, 1911, work was actually begun on the new hospital, the official name of which was made "The Saskatchewan Provincial Hospital." The plans were those submitted by Messrs. Storey & Van Egmond, architects of Regina, Sask., who embodied in

them such desirable features as they thought meet from some of the New York State institutions of like character which were visited by their representative for this purpose. The main building, with a capacity for 500 patients, the power house and laundry were completed in December, 1913:

The unit idea was adhered to in the building, but owing to the Saskatchewan climate, which not infrequently during the winter months shows extreme degrees of cold, the cottage plan was not favored, it being thought that the serving of food therein from a central kitchen, exposed as it would be to such low temperatures as 30 or more degrees below zero, might spell failure. For this, among other reasons, the idea of a central congregate dining room to which patients might be brought, was rejected, the assembling of patients there, three times daily in inclement weather, being considered unwise.

The main hospital building, rather more than 700 feet in length, is two stories in height and is bisected by the administration unit, which is three stories high; a basement of sufficient elevation above ground-level to be well lighted runs underneath the whole structure. Its shape, broadly considered, is that of a rectangle with the projection north and south from each unit of dormitories, these being 86 feet in depth, while a central corridor traverses from end to end the edifice. The administration section occupies the center of this rectangle, the wing on one side being for men, that on the other for women. A pleasing appearance is obtained, notwithstanding the length of the structure, by the material used, namely, red brick and Bedford cut limestone, and the change of color in design thereby secured, which avoids any tendency to monotony in its effect. It is fireproof throughout; solid brick walls, floors and beams of reinforced concrete, tile linings to partitions and walls, stairways of iron and slate, and metal roofs forming the builders' contribution against fire, the dread of all hospital managements. The main entrance to the hospital is in the administration unit, which, on the ground floor, contains the office for the medical superintendent, the general office, and vaults on the one side; reception room, assistant medical superintendent's office, examination room, and dispensary on the other side of the entrance hall. Divided from these offices by a foyer, which in reality is the central part of the corridor of the whole building,

is the main assembly hall of the institution, 33 feet by 54 feet, and having a capacious gallery, which latter boasts a moving-picture machine. In the basement of this section are the officers' dining room, additional vaults, refrigerator plant, bakeshop and main kitchen; on the first floor are quarters for the medical staff and matron, while the second or top floor is arranged as a two-unit infirmary ward for both sexes. A well-equipped operating room, with elevator adjoining, a room for the administration of anæsthetics and one containing a sterilizer are also on this floor, thus supplying the equipment for adequate surgical treatment.

From the foyer, through both wings of the building, runs the main corridor, which connects the various units set apart for patients, each separated from its fellow by fireproof doors. Each wing is made up of four units, classified as acute, observation, chronic, and disturbed, and each is self-contained as far as its administrative essentials are concerned. The first three named have, on the ground floor and first floor, several single rooms for attendants, a linen room and a diet kitchen, the latter supplied by dumb-waiter from the main kitchen for the purpose of serving special meals to those unable to leave their wards. The basement under each gives ample space for exercise rooms, rooms for uncleanly patients, bathrooms, and dining rooms. The dining rooms, one to each unit, save the disturbed, being in the basement, are efficiently served from the main kitchen through the intermediary of adjoining service rooms, which are fitted with steam tables and urns.

Jutting off, in the rear, from the chronic unit, which is at that end of the wing furthest from the center of the building and connected by a passage at right angles to the main corridor, lies the disturbed unit; it contains, on the ground and first floor, several single rooms for patients and also, on the ground floor, five continuous baths as well as the apparatus for hydrotherapeutic and electrotherapeutic treatment. The comparative isolation from the rest of the units prevents noise therefrom disturbing others.

In the basement of this section are placed the mortuary rooms and pathological laboratories. All of the wards are connected by a house telephone with each other and the medical offices, while, in addition, a special electric alarm is connected with the physicians' offices from the disturbed unit.

Each unit save that for disturbed patients has its own entrance through a large veranda, while in the rear of each there is an exit to the spacious airing courts provided for the different sexes; outside fire escapes with entrances on each of the three floors are attached to the administration unit, which, with the various exits already mentioned, furnish plenty of outlets in event of fire. Electrically driven fans force fresh air into each room as well as withdraw foul air by means of ducts throughout all living and sleeping quarters of the hospital, thus ensuring excellent ventilation.

Directly in rear of the assembly hall, and some 50 yards distant, stands the power house, a building 53 feet by 105 feet, with coal bunkers running its full length at the back. Here, by boilers of 375 pounds gauge pressure, is generated 600 horsepower, serving to drive two high-speed engines connected with generators of 100 kw. each, for lighting purposes, electric power for the laundry machinery, fans used in the ventilating system, and pumps for the water supply. Steam under low pressure is furnished to the radiators throughout the building for heating, while high-pressure steam is driven to the laundry, kitchen, service rooms and sterilizers; an ample quantity of hot water for domestic uses and bathing is thereby secured. The laundry, a building 31 feet by 100 feet, adjoins the power house, and lodges all that is most modern in the way of machinery for the work it has to do.

That most important matter of a water supply is provided for in the following fashion: an artesian well, the water from which has been highly rated by the provincial analyst, gives up to a maximum of 20,000 gallons per day and is used for drinking and culinary purposes solely. A second supply is obtained from the North Saskatchewan River, and is used exclusively for the baths, water closets, laundry and power plant. Two separate compartments in a reservoir, with a capacity of 250,000 gallons each, are required under this dual system, one for either kind of water; suction pumps draw both supplies of water to the power house, whence it is forced by compressed air into two large tanks installed in the main building. The original intention was to use the well water for all purposes, but as this supply was found insufficient, the plan of supplementing it from the river was evolved.

The problem of sewage disposal is dealt with by the septic tank system. Extensive works for this purpose, covering an area of 3700 square feet, are placed on the banks of the river; the sewage after collection in the tank is passed on by automatic sprinklers to filtration beds of crushed granite, and, after final treatment in a chlorine tank, the effluent finds its outlet to the river.

In addition to the present buildings, plans are already provided for the following extensions and improvements: a large warehouse, four stories high, with cold storage, store-rooms and workshops, having a spur track from the C. N. Ry. to it and the coal bunkers; a nurses' home; a new wing for men, 350 feet in length, having a capacity for some 300 patients; and seven cottages for employees—the heads of various departments. Of the foregoing, the new wing for male patients, also arranged on the unit plan, is actually under construction, as are the warehouse and cottages for employees. A future extension, similar to that for men, has been tentatively designed for the women's wing, but no need for this makes itself felt as yet, owing to the disparity between the two sexes.

Without blare of trumpets, the new hospital, in its very completion no mean criterion of the fuller growth to which Saskatchewan has attained as a province, received its first patients on February 4, 1914—228 men and 115 women from the Manitoban asylums of Brandon and Selkirk being admitted on that date. These all previously resided in Saskatchewan, but the majority, being of a chronic type, gave slight promise of recovery. At the end of six months 485 patients altogether had been admitted, while the population at present is some 414, namely, 283 men and 131 women. The noticeable preponderance of men over women, as shown by these figures, is illustrative of the comparative newness of the country, the ratio of the sexes being similar to that in all pioneer communities. It is noteworthy that no Indians are numbered among these patients.

The destinies of the new hospital are controlled by Dr. J. W. MacNeill, formerly of Hanley, Saskatchewan, and a member of the Legislative Assembly, who was made medical superintendent in 1913. Dr. MacNeill graduated from McGill University in 1901, and practised medicine in New Brunswick and Hanley prior to his appointment; he is a member of the American Medico-

Psychological Association, and, during 1913, devoted much time to the special study of psychiatry in some of the larger institutions of the East.

In his first report,¹ which covers the period from the opening of the hospital till June 23, 1914, the medical superintendent states that the transfer of the patients from Brandon to their new home, although involving a continuous train journey of some 26 hours, was accomplished without untoward incident; 94 new patients were admitted, while 38 were discharged and 10 died, 4 of the deaths being due to the exhaustion and excitement following the railroad journey from Brandon. Dr. MacNeill also deplors the fact that the relatives of several patients, who are ready for a trial at home, deliberately put off coming for them, their excuse being the length and cost of the necessary railway trip; he hints at difficulties of organization due to inability to secure sufficiently qualified assistance in the subordinate positions, but is, with reason, moderately optimistic as to the results secured so far and the outlook for the work of the new institution.

The percentage of the mentally afflicted for the province, calculated on a population of 500,000, is but a fraction of 1 per cent, and amounts to about 1 out of every 1200 in the whole province. This, compared with other communities, older and more thickly settled, is an excellent showing.

N.B.—For this description of the Battleford hospital we are in the main indebted to Dr. C. A. Porteous, assistant superintendent of the Protestant Hospital for the Insane, Montreal, Que., who has carefully compiled it from details furnished by Messrs. Storey & Van Egmond, the architects, and Dr. J. W. MacNeill, the medical superintendent.

COMMITMENT OF PATIENTS TO HOSPITALS FOR THE INSANE IN SASKATCHEWAN.²

Upon information in proper form before a justice of the peace that any person is or is suspected or believed to be insane and dangerous to be at large, he may issue his warrant to apprehend

¹ Report of the medical superintendent in annual report of the Department of Public Works of Saskatchewan, 1913-1914.

² Through the oversight of the editor this was not inserted in Vol. I.

him and cause him to be brought before him. The justice shall proceed to hear evidence under oath as to the following matters: The alleged insanity of the person upon the evidence of a duly qualified medical practitioner, whether or not there is danger to be apprehended from his being at large, his residence for at least six months previous to the inquiry, his calling or profession, his means of support and his civil condition. He may adjourn the inquiry and remand the person to jail or to some safe custody, but in no case can he adjourn the inquiry for more than three days.

If the justice is satisfied that the person before him is insane and dangerous to be at large, he shall commit him to the nearest jail, or if it is his opinion that he should not be committed to jail, then to the custody of any relative or friend, there to await the order of the Attorney-General for removal to an asylum in Saskatchewan or some other province of Canada or until danger is passed. If it appears to him that the person is not insane or not dangerous to be at large, then he shall discharge him from custody.

If the justice is satisfied that he is insane and dangerous to be at large, it shall be his duty to make inquiry if he be possessed of property, also to ascertain if any persons are dependent on him for support, and to secure all other information to determine whether or not he shall be maintained as an insane pauper. The Attorney-General may by his warrant order and direct the removal to an asylum of any insane person committed to jail.

If upon the committal of a person, any relative or friend believes it to be unwarranted and not justified by the evidence, he may apply within four days to a judge of the Supreme Court of Saskatchewan for his discharge from custody on the ground that he is not insane or if insane is not dangerous to be at large. It shall be the duty of the supreme judge to examine the person thus committed and the evidence and other papers relating to his committal, and to hear further evidence, and if satisfied that the person is not insane or if insane is not dangerous to be at large, he may grant a certificate, or may dismiss the application.

Any relative or friend who desires to remove a patient thus ordered to an asylum may act instead of the person appointed for the service by the justice of the peace.

A female committed to an asylum, unless accompanied by her mother, father, brother, sister or husband, must be placed in charge of a woman.

If any person confined in any jail under conviction is certified to be insane by a duly qualified medical practitioner, the Attorney-General may make inquiry in reference to his case similar to the inquiry made in a former section by a justice of the peace.

If a person is committed to safe custody in a jail or asylum all the expenses incurred in his apprehension, examination, committal to jail, medical certificates, custody, temporary care and maintenance shall be borne by the insane person if he is possessed of sufficient means. If a person committed to an asylum is not possessed of sufficient means or his relatives are incapable of providing the same, the cost of his maintenance and other expenses shall be paid by the province.

An Indian shall not be removed to an asylum unless the expenses of his maintenance and other charges are guaranteed by the Superintendent of Indian Affairs.

If a patient removed on trial from an asylum by his friends with the consent of the superintendent, within six months again becomes dangerous, he may be apprehended and taken back to the hospital on a warrant from the Attorney-General without further proceedings.

The Lieutenant-Governor in Council may from time to time authorize the temporary use of any building or buildings for the use of the insane and the removal of patients thereto. He may also establish rules and regulations for the management, conduct, and government of all officers and employees and such rules and regulations shall remain in force and be of the same effect as if they had been enacted by the Legislature of Saskatchewan.

THE CARE OF THE INSANE IN THE YUKON AND NORTH-WEST TERRITORIES.

The history of the care of the insane in the Yukon and North-West Territories forms an integral part of the history of the Royal North-West mounted police, since, there being no asylums in these districts, the early care of lunatics and their conveyance to an institution in one of the neighboring provinces generally falls to the lot of the members of this force, and conscientiously and kindly has the duty always been performed, often at the cost of well-nigh incredible hardships.

The force, probably the finest body of mounted constabulary the world has ever seen, was organized in 1873 under the Dominion Statute 36 Vict., Cap. XXXV, which was amended by 37 Vict., Cap. XX, and 38 Vict., Cap. L. These acts conferred upon members of the corps the powers and functions they respectively exercise in the territories, and, if required, in every Canadian province for the purpose of carrying out the criminal and other laws of the Dominion.

On the first formation of the body, in the autumn of 1873, 150 men were wintered in the stone fort at Lower Fort Garry. These in the spring of 1874 marched to Dufferin, the former headquarters of the British North American Boundary Commission, and being there joined by 150 men from Toronto, started on their journey westward and built the present Fort Macleod. The strength of the command was increased from time to time during its early years, but later it was allowed to dwindle. Indeed, prior to the outbreak of the present war there was talk of still further lessening the number of the men, and even of disbanding the corps altogether. The war, however, induced a change of opinion on the part of the government, and 500 additional non-commissioned officers and constables were enlisted. This step was considered necessary in view of the fact that there are 175,000 Germans and Austrians in Alberta and Saskatchewan. The present strength of the force is therefore 1267 officers, non-commissioned officers and constables.

When originally embodied, the district patrolled by the "Mounted" stretched from the 49th parallel, the border line on the south, to the Arctic Ocean, and extended westward from Baffin Bay, Davis Strait and Labrador to Beaufort Sea and the farthest confines of the Yukon Territory.

The area embraced within these limits, amounting to no less than 3,150,572 square miles, has been curtailed to the extent of 516,571 square miles by the division of the district of Keewatin, formerly administered by the Governor of Manitoba on behalf of the Dominion Government, between the provinces of Manitoba and Ontario. This division was made pursuant to a resolution of the House of Commons, passed July 13, 1908, which resolution was carried out by the acts of the Dominion Parliament, 2 Geo. V, Caps. XXXII and XL, assented to April 1, 1912.

Alberta and Saskatchewan, the latest formed provinces, still, however, fall under the jurisdiction of the police, and will continue to do so until April, 1916, when the services of the force therein will terminate, unless prolonged by mutual agreement, which is the suggestion of Comptroller Fortescue in his report for 1914. The actual sphere of labor of the constabulary, it will thus be seen, still covers no less than 2,634,000 square miles of territory.

"Maintiens le droit" (uphold the right), the motto of the force,¹ is no empty phrase. It is and always has been worthily upheld by the members of the corps, whose fetich is duty, from the latest joined recruit to the veteran grown grey in the service. It is this sense of fidelity to duty, combined with a bulldog tenacity of purpose, undaunted courage, coolness in the face of danger, and resourcefulness in emergency, that has enabled this handful of mounted, well-disciplined men, stationed in the almost boundless territory of the North-West, to put an end to the period in which each man was a law unto himself; to make justice and order a civilized fact instead of the usual frontier myth. Members of the force sometimes answer the last reveille in the course of duty, but there are always others just as capable, equally brave, to take their places. Real heroes, worthy of world recognition, die fighting a good fight without hope of reward or praise beyond that bestowed by their comrades in arms.

¹ Its badge is a buffalo head surmounted by a crown.

A deplorable feature of life in the unsettled parts of the North-West is that some would-be homesteaders there are unable to stand the strain of the arduous toil and endure the frightful loneliness of their solitude. In the summer life may be bearable; it is in the winter when all the prairie is one vast, white sheet of snow for months on end, and communication with the outside world is practically cut off, that the mind falls to brooding and comes close to the breaking point if it does not actually give way. To wrest a living from the soil while condemned to practical isolation for a great part of the year needs a strong man mentally as well as physically, and not everyone can make the sudden change from the life of the town to that of the wilds and be proof against failing crops, business worries, and, last but not least, the oppression of solitude. Under such stressful circumstances it is not to be wondered at that men sometimes break down and lose their reason. It is then that the mounted policeman is called upon to perform one of his most unpleasant duties by acting as the escort of the lunatic from an outlying settlement, where there is no provision for such cases, to some town where he may receive proper attention. Nor is it always the lonely settler who is thrown upon his hands. It may be a stranger from the East or an Indian whose mind has become affected. What adds greatly to the hardship of the constable's task is the fact that, owing to the small strength of the detachments, it usually becomes a "one-man job."

It is under the authority of "An Ordinance Respecting Dangerous Lunatics," passed 26 September, 1879,¹ that this disagreeable duty falls to the lot of the mounted police. By this it was enacted that when information was laid before a justice of the peace that any person was believed to be insane and dangerous to be at large the said justice was empowered to have the party brought before him for examination. If, after hearing the evidence adduced (taken under oath), the justice was satisfied of the prisoner's insanity, it became his duty to issue a warrant to the following effect:

WHEREAS, Information was laid before me, a justice of the peace in and for the said territories, on the oath of that

¹ Chapter 2, Ordinances of the North-West Territories, 1879.

..... was insane and dangerous to be at large; and, whereas, enquiry has been made by me respecting the sanity of the said; and whereas I have found and adjudged the said to be insane and dangerous to be at large. These are, therefore, to command you the said constables or other peace officers to take the said and safely convey him to the North-West mounted police or to the keeper of the common gaol at..... and to deliver to the police aforesaid or to the said keeper, together with this precept; and I do hereby command the said police force, or the keeper of the said gaol, to receive the said into custody, and safely keep him until the pleasure of the Lieutenant-Governor be known, or until he shall be discharged by law.¹

By an act² passed in July, 1885, this ordinance was added to by the subjoined clauses:

Whenever, under any law or ordinance in force in the North-West Territories, any insane person is kept in custody until the pleasure of the Lieutenant-Governor is known, or until such person is discharged by law, the Lieutenant-Governor may cause such person to be removed to and confined in any asylum or place of confinement from time to time designated for that purpose by the Governor in Council

Any transfer which may have been made before the passing of this act of insane persons coming from the North-West Territories or from the District of Keewatin, and who had been theretofore confined in the Manitoba Penitentiary, from that institution to the Selkirk Lunatic Asylum, in the Province of Manitoba, or to any temporary lunatic asylum in the said province is hereby ratified and confirmed; and should any such persons be confined in a temporary lunatic asylum at the time of the passing of this act the Lieutenant-Governor of the Province of Manitoba is hereby authorized to cause their removal to the said Selkirk Lunatic Asylum; and the superintendent of the said asylum or the superintendent of such temporary lunatic asylum, as the case may be, shall detain any such persons committed to his keeping until the pleasure of the Lieutenant-Governor is known, or until such persons are discharged by law.

By the same act the Minister of the Interior was authorized to make arrangements with the Lieutenant-Governor of Manitoba for the payment by Canada to Manitoba for the care and maintenance of patients detained in the provincial asylum.

It might be surmised from the foregoing that the duty of the mounted police in connection with lunatics was light, and consisted in merely taking temporary charge of them when handed over to their custody. Not so. In reality the carrying out of

¹ Chapter 2, Ordinances of the North-West Territories, 1879.

² Statutes of Canada, Chap. 51, 1885.

nearly all the details rests upon their shoulders. To them is allotted the task, very often, of arresting the supposed or alleged lunatic, his conveyance to and arraignment before a justice of the peace or other magistrate, and, generally, if adjudged insane, his safe convoy to one of the provincial asylums.

For the year ending 30th September, 1913, 377 lunatics passed through the hands of the mounted police, and for the year ending 30th September, 1914, 349.

As illustrating their devotion to duty and the hardships undergone by the members of the force in their care of the hapless insane, the following cases may be cited. They are taken from a work by A. L. Hayden, entitled, "The Riders of the Plains—A Record of the Royal North-West Mounted Police of Canada, 1873 to 1910," which work, according to Comptroller Lawrence Fortescue, of the force, is thoroughly reliable, being compiled from the official records in his office at Ottawa:

One of Sergeant Field's hardest trips was made with an Indian lunatic from Fort McKay on the Athabasca River. Early in February, 1907, he received a letter (at Fort Chipewyan) informing him that an Indian, the son of one Joseph Bouchier, living at Fort McKay, was violently insane and beyond control. The sergeant had just returned from a northern patrol, and his dogs were not in a condition to make another long journey, so he asked Bouchier to try and wait until the summer, but the man replied that his son was becoming more violent and dangerous daily.

In the face of this, the sergeant had no option but to inspect the case for himself. He hired a team of dogs, fought his way through the heavy snow storms to Fort McKay, and set off southwards with the lunatic. It was bad going all the way. A good part of the journey across country there was no trail; and in addition to the strain on the dogs, there was the fact that the Indian was constantly troublesome. He had to be strapped to the sled frequently, otherwise he fought and bit like a mad dog. But Sergeant Field worried through and came at last to Fort Saskatchewan, where he handed over his charge to the provost in the guard-room. This was a 500-mile trip, taking 17 days in all.¹

More arduous still was the duty that fell to Constable A. Pedley, stationed at Fort Chipewyan, in December, 1904. This police outpost was formerly an important center of the fur trade and served also as the starting point of many notable exploratory parties to the northern coast. From it Mackenzie set out to follow to its mouth the great river that bears his name, and Simpson started to trace the coast line of the Arctic Ocean. It was, further, a resting place for the expeditions under Franklin, Back, Richardson and Rae.

¹ "The Riders of the Plains," p. 285.

A lonely spot at all seasons of the year, it is at its worst in the winter, when lake and river are ice-bound, and all the country, as far as the eye can reach, is covered with deep snow. Travelling is almost impossible without a competent guide and a strong team of dogs, and few besides trappers are to be met on the trail. In the winter of 1904, however, a Presbyterian minister named Mr. B—— found his way into this wild region. He was an evangelist, engaged on a missionary tour in the North-West, and during the summer had been visiting the far North, where only Indians and half-breeds wander. Later on he went over the Canon trail of the Peace River into the gold country of British Columbia. Thence he returned to the Hudson's Bay depot at Peace Station to make this his quarters for the winter.

The "depot" is described as having been a "long, low, log cabin" in the sole charge of a half-breed. It was many miles from any other post or settlement and was only occasionally visited by Indian traders bringing in furs and supplies. Here the missionary elected to pitch his camp and here he abode for some months, shut up in a dark, smoky hut, half buried in snow and with the half-breed for sole companion. Their food consisted of bacon and corn meal, varied by a jack rabbit whenever the weather was mild enough to allow the breed to go "gunning."

Such an existence would have been depressing enough in any circumstances. It was rendered doubly so by the fact that conversation between the two men was next to impossible. The half-breed, Anton Ribeaux by name, had no English and the missionary only a few words of the other's patois. It is scarcely to be wondered at that this solitary life told upon the less hardened nerves of the evangelist. When one day a squad of Royal North-West mounted police on a patrol eastward rode by the log hut they found Ribeaux much concerned about his guest's state. He begged that the other might be removed, as there was little doubt he was becoming insane.

Proceeding on their way, the patrol reported the case to the detachment of three men at Fort Chipewyan. The sergeant in charge of this police post promised to look into the matter, and Constable Pedley was detailed to make the trip to Peace Station. Pedley set off with his dog team, in due course reached the hut, found the missionary by this time a raving madman, and carried him back to the post. The next thing to be done was to get the madman down to the nearest settlement for medical treatment, down to Fort Saskatchewan, in fact, immediately to the north of Edmonton. For this task Constable Pedley was eminently the man, as the stronger and more experienced of the two constables. Only one could be spared for the journey; the sergeant and the remaining constable had to stand by their post.

It was now the second week in December. The weather was bitterly cold, but the real rigor of the Arctic winter had not yet been felt. When Pedley set out with his insane charge the grimmest and most daunting part of the season lay before him. According to instructions he was to follow the course of the Athabasca River so far as was possible, the dis-

tance from Fort Chipewyan to Fort Saskatchewan, being, as the crow flies, nearly 400 miles. By trail it was well over 500. For the journey a team of the best dogs available was provided and a strong, light-running sled. The latter was loaded with provisions and clothing, a small tent and some blankets.

On leaving Fort Chipewyan the mad missionary was wrapped in thick furs, with his feet, which were frost-bitten, encased in large moccasins. He was put into an Eskimo sleeping bag and fastened by straps to the sled. For most of the journey Pedley himself travelled on foot, running with the dogs and helping them at times to pull the sled over bad places. Soon after starting the party encountered heavy, blinding snowstorms, which made it very difficult to keep on the trail. The Athabasca is a winding river, fringed for scores of miles by thick timber, but in places broad and clear. When frozen over these wide reaches of water make travelling easier than on the snow-packed trail.

In his report of the trip Constable Pedley dwells on the great depth of snow encountered and the severity of the storms. The temperature, he notes, was from 20° to 50° below zero, being at its lowest in the long hours of the dawn. Every day at 4 p. m. he made his camp, to dine on cold meat, tinned beans, and tea, if a fire could be got going. The madman would eat little at first, and later refused to touch any food at all. Pedley had therefore to force him to eat, fearing that he might succumb to exposure and exhaustion before reaching their destination. It was all pretty lonely and horrible, this daily routine of trudging through the snow, facing a bitter east wind and with never a pause except when a rabbit or a bird crossed their path and gave the constable a chance for a shot. As the missionary could not be kept fastened to the sled all the time, he was released now and then to walk, and on these occasions careful watch had to be kept to see that he did not try to escape.

On the fourth day out the madman did make an attempt. Bursting his bonds with a superhuman effort, he leapt from the sled and ran for some woods not far off. Pedley gave chase instantly, and after a desperate struggle succeeded in mastering him. It was only a few days after this episode that they were held prisoners by the most terrible snowstorm of the whole journey. For 48 hours a perfect gale raged, and for protection Pedley lashed himself and the madman, in their fur bags, to a tree, the dogs having been entrenched in the snow, with the upturned sled as a wind-shield. The portable tent was of no use in such conditions; it would have been blown to bits in no time.

As the more wooded country below Fort McKay was approached game became more plentiful. There was sometimes a caribou to be shot, yielding a welcome meal of fresh meat. But with the deer were wolves, first the smaller variety, and later the larger timber wolves, for whom at night it was necessary to light great fires, lest their hunger should embolden them to attack the camp. Thanks to these precautions and the constable's vigilance, there was no disaster. And so at length the little party of two men reached Fort McMurray, where they crossed to the eastern side of the great river.

"I knew now," says Pedley, "that one-half of our journey was completed. During the summer perhaps half a dozen persons live at Fort McMurray, but we found only a single individual there, a half-breed Indian. He did his best to make us comfortable, and after a rest of two days we took the trail again, and, much refreshed, journeyed on down the river. Fresh troubles were at hand, however. The missionary grew sullen again and refused to eat. When food could no longer be forced down his throat, I became alarmed and concluded to once more loosen his fastenings to give him exercise, hoping thus to restore his appetite. While I was gathering fuel for a fire, he became violent, picked up a stick and attacked the dogs. Then, seeing me with my arms full of kindling wood, he made a dash for the open prairie. With all his fasting and confinement he gained speed, and soon outdistanced me. But I kept on running, and found that he was too weak to go far. In the end, I overtook him, and fastened his legs and arms so that he could not do any injury to himself and me.

"I am a pretty strong man," adds Pedley, "but in the wind and numbing cold it was really a difficult job to carry him a quarter of a mile to camp. However, I got him there and was well rewarded, for he began eating again, and from that time his appetite grew better."

At Big Weechume Lake a guide was requisitioned, there being no trail over this part of the country. Thence they travelled to Lac La Biche, where a team of horses was found, and these were taken in the place of the dogs. And so, without further adventure, Constable Pedley duly arrived at Fort Saskatchewan, the date being the 7th of January. The unfortunate missionary was here turned over to the guard-room to be examined by the assistant surgeon. The doctor pronounced it a most remarkable case.

He (the madman) was badly frozen about the feet, and the exposure to the cold had caused paralysis of the tongue for several days. Every care and attention was given him at the hospital (to which he was transferred), with the result that he was discharged on the 23d of February, with the loss only of the first joint of a big toe. His mind and speech were as good as ever. His life was saved.

So much for the Rev. Mr. B——. The plucky constable, who had brought him hundreds of miles down to civilization in the depth of winter, fared the worse of the two. His mission accomplished, Pedley commenced his return trip to Fort Chipewyan, to report himself to his sergeant. He faced the terrors of the lonely trail again with a brave heart, but, though none guessed it at Fort Saskatchewan, the strain of that fearful journey, alone with a madman, had been too much for him. At Lac La Biche the poor fellow broke down and became violently insane. From this point he was immediately brought back to Fort Saskatchewan, to be ordered away to the asylum at Brandon. In this institution the constable remained for six months, at the end of which time he was discharged "cured."

Pedley returned to headquarters, and in consideration of his remarkable service was granted three months' leave. He came back to his home in England—he is an East Anglian—but if any effort was made to induce him

to stay there permanently he stoutly resisted it. The expiration of his leave saw him again at Regina, ready to resume his duty, and, eventually, to re-engage for a further term of service. You may see Constable Pedley at the headquarters barracks still, but you will not find him quite the same man. That one experience has left its mark upon him, and it is likely to remain.¹

Inspector E. Telford, writing from Dawson City, states: "We have no asylum in the territory. Insane persons are sent right out to the asylum at New Westminster, B. C., and only held here in our guard-house for a few days, pending the decision of the commissioner of the Yukon Territory." Comptroller Fortescue, of Ottawa, says that a like rule prevails as regards those in the North-West Territory, who are sent to the asylums of Alberta and Saskatchewan.

At the close of the year 1914 there were 36 Yukon patients in the New Westminster and Coquitlam asylums of British Columbia, the daily maintenance charge paid by the Dominion Government for their keep being \$1 per patient.

¹ "The Riders of the Plains," p. 286.

THE CARE OF THE INSANE IN QUEBEC.¹

From the records available it would appear that insanity was commoner among the Indians inhabiting Eastern Canada and the interior than among those dwelling along the Pacific Coast. The 75 volumes constituting the "Jesuit Relations"² make numerous references to mental disorder, both real and feigned, as well as to epilepsy, "falling sickness," occurring among the Algonquins. This race, whose territory extended from the Atlantic to the Mississippi, included among its tribes the Micmacs of Acadia and the Montagnais of the St. Lawrence, while in the heart of their land were located the Iroquois and the Hurons, related to but generally at war with them. It was among the latter that the Jesuits planted their earliest missions.

Speaking of the Hurons, Father François du Peron, surnamed in their tongue Anonchiaia, gives them the following rather unenviable character :

The nature of the Savage is patient, liberal, hospitable ; but importunate, visionary, childish, thieving, lying, deceitful, licentious, proud, lazy ; they have among them many fools, or rather lunatics, and insane people.³

That the Indian was shrewd enough to recognize the value of malingering as an easy means of making a living is evident. Thus, from LeJeune's description one would gather that, while some of the cases of ononhaioia, or "turning the brain upside down," the name given by the savages to insanity, were genuinely insane, many of them were impostors, who, by relating certain dreams, became possessors of almost anything they wished that was owned by members of the tribe.⁴

Again, LeJeune and Lalemant, speaking of the "Neutral Nation," say :

¹ By Dr. T. J. W. Burgess, superintendent Protestant Hospital for the Insane, Montreal, P. Q.

² "The Jesuit Relations and Allied Documents," edited by Reuben G. Thwaites, secretary of the State Historical Society of Wisconsin, and published at Cleveland, Ohio, 1896, by the Burrows Bros. Co.

³ "Jesuit Relations," Vol. XV, p. 155.

⁴ *Ibid.*, LeJeune, 1636, Vol. X, p. 175.

The third respect in which they seem to differ from our Hurons is in the multitude and sort of lunatics. In going through the country one finds people who play this part with all possible extravagances, and any liberties they choose, and who are suffered to do all that is pleasing to them, for fear of offending their demon. They take the embers from the fire and scatter them around; they break and shatter what they encounter, as if they were raving, although in reality, for the most part, they are as self-controlled as those who do not play this character.¹

Natheless, the Fathers, despite their skepticism, freely admit the not infrequent occurrence of true cases of mental disorder. The following instances are illustrative of such belief as well as of the methods of treatment adopted by the French and their Indian protegees:

In Volume VIII of the "Relations," page 33, mention is made of an Indian who, in time of famine, "went to Quebec when, having tried to kill some Frenchmen, the Governor, seeing that he was mad, had him put in chains, to surrender to the first Savages that might come along." Again, LeJeune in his "Relations," 1639-40, referring to the Huron fire-feast, says:

I will give an account of something that happened during the time of this great ceremony. One of the prominent young men of the village, while running during one of their three nights, and acting the madman, encountered a specter or demon, with whom he had some words; this meeting so upset his brain that he fell down and actually became insane. The remedy was, promptly to kill two dogs, and, among others, one which he held specially dear, of which a feast was made. In consequence of this he became better and finally returned to his senses.²

A harsher method of treatment is thus recorded by the same writer, 1638:

One wretched Savage, while mocking at our belief, became insane in the midst of his jeers. As he was foul and shameless in his madness, the Savages, in order to get rid of him, fastened a rope to his neck and his foot, which they drew up against his thigh, so that, when he came to stretch himself and to tighten the cord, he strangled himself. Thereupon they made his grave and said that he was dead.³

Once more, the Father in 1836 cites what seems to have been a genuine case of mental alienation, the narrative portraying as well the credulity of the lunatic's fellow tribesmen. He speaks

¹ "Jesuit Relations," Vol. XXI, p. 199.

² *Ibid.*, Vol. XVII, p. 197. This would probably be a case of epilepsy.

³ *Ibid.*, Vol. XIV, p. 227.

QUEBEC LUNATIC ASYLUM IN 1850.



of the lunatic as running about naked in the snow at the end of January, singing night and day, and fasting for over 18 days. Three several miraculous things were attributed to him by his compatriots: first, he was not in his wandering buried in the snow, though it was three feet deep; second, he threw himself from the top of a high rock without being hurt; and, third, when he came back he was not at all wet and his shoes were as dry as if he had not set foot out of his cabin.¹

The following lengthy and interesting account of a case is culled from the same source:

During the night of the 18th and 19th (October, 1655) we were diverted by an amusing incident. One of our Savages awoke at midnight, all out of breath, trembling, crying out, and tossing about like a maniac. We thought at first that he had had the falling sickness, so violent were his convulsions. We ran to him and tried to soothe him; but he so redoubled his cries and his frenzy that the rest were frightened and hid the weapons, lest he might gain possession of them. While some prepared a potion for his case, the others held him as well as they could; but he escaped from their hands and, running away, leaped into the river, where he acted most strangely. He was followed and dragged out, and a fire was made for him. He said he was very cold, yet to get warm he withdrew from the fire, and took his position near a tree. The medicine that had been prepared was offered to him, but he did not think it suited to his ailment. "Give it to that child," said he, pointing to a bear's skin stuffed with straw. They had to obey him and pour it down the animal's throat. Up to that time everyone had been anxious; but finally, when he had been thoroughly questioned concerning his ailment, he said that he dreamed that a certain animal, whose nature it is to plunge into water, had awakened him and jumped into his stomach; that, in order to frighten the creature, he had leaped into the river; and that he was determined to vanquish it. Then all fear was changed to laughter. Still, it was necessary to cure the man's diseased imagination. They all, therefore, pretended to be mad like him, and to have to fight animals which plunged into the water. Thereupon, they prepared to take a sweat, in order to induce him to do so with them. While he was crying and singing at the top of his voice in the little tent used as a sweat-box, and imitating the cry of the animal with which he was contending, they, too, began, every man of them, to cry and sing in imitation of the animals with which they were supposed to be afflicted—all, in tune with their song, beating that wretched man. What confusion! a score of voices imitating ducks, teals, and frogs; and what a spectacle to see people counterfeiting madness in order to cure a madman! Finally, they succeeded; for after the man had perspired well and become thoroughly tired, he lay down on his mat and slept as peacefully as if nothing had

¹ "Jesuit Relations," Vol. X, p. 199.

happened. His ailment, coming in a dream, disappeared like a dream in his sleep. He who deals with pagan Savages is in danger of losing his life through a dream.¹

Scant as is our knowledge of insanity occurring among the aborigines, it is vastly more scant as regards its occurrence among the earliest French settlers, and it is much to be regretted that no Pepys or Evelyn existed to record the early inner life of the colonists of La Nouvelle France, now the Province of Quebec. Certainly no state or province in the United States or Canada has such an ancient or interesting history. One would like to get an actual glimpse of the real life of the colony—something that would shed some rays of the sunshine of human interest on the dreary first years of the colony's history.

It would be a stringent tax upon one's powers of belief to regard insanity as unknown among the earliest French settlers. Small as was the population of Quebec, which, in 1640, did not much exceed 200,² there must have been some cases of mental breakdown among them, a fact rendered the more likely by the terrible strain incident to fear, cold and hunger which they were forced to undergo.

Our only sources of information covering this period are Champlain's narratives, published in 1619 and 1632; the Recollet Father Sagard's "*Histoire de Canada*," which appeared in 1634, and the "*Jesuit Relations*," already referred to, but these throw little light on the subject of the insane or their care. The first deals chiefly with the dissensions in the Council between church and state, and between the Franciscans (Recollets) and the Jesuits; the intrigues of the successive trading companies, which cared only for the trade in peltries; and the wranglings between Catholics and Huguenots. He also gives an excellent description of the customs and habits of the Algonquins in peace and in war, of the quarrels between them and the Hurons, and of the warfare between these combined tribes and the Iroquois. Father Sagard goes into minute details of the manner of life of the Huron girls and Indian women, but says little or nothing about the French settlers, devoting much space to decrying the opponents of his

¹ "*Jesuit Relations*," 1655-56, Vol. XLII, p. 65.

² Parkman, "*The Jesuits in North America*," Frontenac edition, Vol. I, p. 247.

order, the Jesuits. The "Relations" were chiefly arguments in favor of the glorification of the Society of Jesus rather than faithful chronicles of contemporary events. Though replete with much valuable information regarding the Indians and describing in extenso the good work done by the Society, as well as the sufferings and martyrdom undergone by its members, we could have wished that LeJeune had given us a little more secular history.

Throughout the "Relations" there is but one case of insanity mentioned as occurring among the early settlers. This is recorded as follows:

In this month (December) Barbe Halé was brought from Beauport. She had been possessed with a Demon of lunacy for five or six months, but only at intervals. At first she was placed in a room in the old hospital, where she passed the night in the company of a keeper of her own sex, a priest and some servants. *Longa historia, de qua alibi fuse.*¹

This very meager account is supplemented thus by Mère Marie de l'Incarnation:

It seems that there was a certain miller who was adjudged by the Church an apostate and a magician. He, by his diabolical arts, had bewitched the girl and persuaded her to marry him. The proof of his intercourse with the devil was that the poor hysterical girl declared that he visited her by day and by night, after demons had appeared to frighten her. The Bishop sent the Jesuits to exorcise the devil, and he himself adopted measures to the same end; but Beauport was so far away that he decided on placing the girl under the charge of the Hôtel Dieu nuns, and putting her sweetheart in prison. This treatment, it must be acknowledged, was mild compared with the fate which would have overtaken the pair in New England. The authority of the Church in Canada, sagaciously administered by responsible men, had at least the effect of restraining such mental vagaries as were attributed to witchcraft in New England and Germany, and which in those countries were punished by most cruel penalties.²

Of the number or condition of the insane in Canada during the early days of the French régime, it may be said that little or no information is obtainable. Doubtless their treatment differed in nowise from the neglect and cruelty shown them in all other countries at the same period. Some were cared for by their

¹ "Jesuit Relations," 1660, Vol. XLV, p. 167.

² "Old France in the New World," by James Douglas, LL.D., 1906, p. 425.

friends, in what manner can be imagined;¹ others were suffered to roam about at will, while others, if considered dangerous, were placed in custody. A proportion, as is surmised by Dr. A. G. Doughty, Dominion Archivist, were doubtless returned to their motherland. This supposition is borne out by an ordinance of 15th October, 1663, published in the "Judgments and Deliberations of the Sovereign Council of New France," which states that "*toutes les personnes malades*" shall be returned to France as soon as possible. This wording in all probability comprehended those afflicted in either body or mind.

In 1639 the Duchess d'Aiguillon, niece of Cardinal Richelieu, founded the Hôtel Dieu of Quebec to treat indigent patients, the crippled and idiots. As here employed the term idiot probably refers to all forms of mental disability, acquired as well as congenital; and the creation of this establishment is especially noteworthy, inasmuch as it was not only the first move toward the care of the insane, but was the first hospital instituted in North America. Later on, in 1643, to answer the same purpose, Made-moiselle Mance founded the Hôtel Dieu of Montreal.² Whether any, or how many, lunatics were admitted at Quebec it is impossible to ascertain, but the Mother Superioress asserts that none were ever received into the Hôtel Dieu of Montreal.

¹ As exemplary of home-care in those, and even much later, days in the colony, there might be cited the following extract from a letter (dated March 28, 1913) received from a friend of the writer, and a well known authority on the early history of the province: "I remember a man who was some ten or twelve years my senior, a French-Canadian, telling me well on to fifty years ago, that his grandfather had been insane; that he lived with the family; and that he, the narrator, with his brothers, used to tease the old man as if he had been a wild beast. My recollection is a little dim; but I am pretty certain he told me, in reply to a question, that his parents did not much mind these doings. I judged also that the old man was tied up or caged in some way, and was teased as boys might tease a bear that could not get at them, and I imagine it was typical of the manner the insane were often treated in country places in the early part of the 19th century."

² "A Page of History: The Origin, Evolution, and Present Condition of the Practice of Medicine in Canada," by A. A. Foucher, M. D. President's address at the opening of the Second Congress of French-Speaking Physicians of North America, Montreal, 28th June, 1904. (Translation.) From the Montreal Medical Journal, December, 1904, Vol. XXXIII, No. 12.

Madame de Comballet, née Marie Madeleine de Vignerod, niece of the great Cardinal, had had her attention directed, by LeJeune's narrative for 1635, to Canadian missions, and his suggestions as to the foundation of a hospital at Quebec at once appealed to her heart—an impression doubtless strengthened by the counsel of Saint Vincent de Paul, who was an intimate friend of her uncle. She offered to send out at her own expense some hospital nuns from Dieppe; the Company of New France granted them lands; and the undertaking was aided in every way not only by Madame de Comballet, but by Richelieu himself.

Speaking of the generosity and devotion of the Duchess, LeJeune in the "Relations," Vol. VIII, pages 310 and 325, states that Madame de Comballet wished to put her hand to the work of founding a hospital in New France, and gives the following extract from a letter written by her to him on the subject:

God having given me the desire to aid in the salvation of the poor Savages, it has seemed to me, after reading the account which you have written of it, that what you consider can best serve for their conversion is the establishment in New France of Hospital Nuns. I have therefore resolved to send thither this year six workmen to clear some land and construct a lodging for these good Sisters. I entreat that you will take care of this establishment. I have asked Father Chastelaine to speak to you about it for me, and to explain to you my plans more in detail. If I can do anything else for the salvation of these poor people, for whom you take so much trouble, I shall consider myself happy.

Later, in speaking of the hospital, then an accomplished fact, and the good work done by it, especially in the care of those suffering from smallpox, LeJeune ingenuously remarks:

All this is due to the charity and liberality of Madame the Duchess d'Aiguillon, who accomplished this work with a care and affection truly golden. . . . In conclusion, I do not know which of the two feels most satisfaction, Madame the Duchess d'Aiguillon in having founded and built a house to our Lord in New France, or her nuns in finding themselves in this new world.¹

The enterprise took shape the following year under the auspices of this good woman, and at her charge, for she gave 22,400 livres as an endowment. She also, as stated by Dr. Douglas, it may be

¹ Jesuit Relations, 1640, Vol. XIX, pages 11 and 25, by LeJeune and Lalemant.

assumed, ceded her seignior, the fief of Girondines, and thirty acres within the banlieu of Quebec, toward the undertaking.¹

The establishment, opened in 1639, was placed in charge of the Hospitalières of the Mercy of Jesus, whose foundation dates back to the 12th century, the first three to come over from Dieppe being Mère de Saint Ignace, Mother Superior; Mère de Saint Bernard; and Mère de Saint Bonaventure. In Champlain's works it is mentioned that "the first physician at the Hôtel Dieu in Quebec was one Robert Giffard, a nobleman, Seigneur of Beauport, physician to the King, and counsellor to His Majesty."² Another noteworthy member of the attending staff was Dr. Michel Sarrazin, who first came to Canada in the capacity of surgeon-major of the French troops. Though eminent as a physician, he is less known as such than as a naturalist, having been delegated by the French Academy of Science to make a special study of animals and plants in Canada. He wrote an exhaustive treatise on the anatomy of the beaver, and in his botanical researches discovered the pitcher plant, to-day known, in his honor, as *Sarracenia purpurea*.

The original institution, a humble log and bark structure, was located, in 1640, at Sillery, a village on the banks of the St. Lawrence, about four miles above Quebec, named after Commander Noel Burlard de Sillery. Owing to the fear of Indian incursions, however, the nuns, in 1646, by the advice of the Governor, of the Jesuit fathers and of the inhabitants, removed their hospital from Sillery to Quebec, not without great inconvenience, because the building being prepared for them there had as yet but the four walls and the roof.³

The Hôtel Dieu was twice burned, the last time in 1755, when it was almost totally destroyed by an incendiary fire, in which nearly all the original archives were lost. In addition, for twenty-

¹ Old France in the New World. Jas. Douglas, LL. D., 2d Ed., p. 265.

² Mons. Giffard, who was the first landowner to be made a Seigneur in New France, and became the Sieur Giffard, did homage for his seignior on the last day of October, 1635, before Marc Antoine de Bras de Fer, Sieur de Chasteaufort (Lieutenant-Governor). On the land thus granted he built a substantial stone residence, which place, more than 200 years later, became the site of Beauport Asylum.

³ Jesuit Relations, Vol. XLIV, p. 193.

five years after the taking of the city by the forces under General Wolfe, it was garrisoned by British soldiers. In spite of these calamities, however, it still retains its original site in the City of Quebec.

The next findable reference to the care of the insane (and this is indubitable) in the early days of the colony is connected with Bishop St. Vallier and the General Hospital at Quebec.¹

The Recollets, four of whom had been brought from France by Champlain in 1615, and with whom rests the honor of having celebrated the first mass ever said in Canada, had built a monastery on the banks of the St. Charles River in 1621.²

The building is thus described by Dr. Douglas :

It was a two-storied wooden building, 34 feet by 22 feet, with a capacious cellar. The lower story was divided by a stone partition wall into two rooms, one of which served temporarily as a chapel, the other as a kitchen and refectory. The upper story was divided into one large and four small rooms, with provisions for isolation in a sixth. There were stone towers for defence at three corners, and a demilune of heavy timbers before the entrance.³

It was said to be the finest building in all Canada at that time.

The Recollets transferred this property, in 1690, for use as a general hospital to Monseigneur de Saint Vallier, who, in 1688, had become the second Bishop of Quebec. By him, in 1693, it was placed in charge of some nuns from the Quebec Hôtel Dieu, and close to it, in 1714, he erected a small dwelling, the building of which he superintended himself, for the reception and treatment of those suffering from mental diseases. In a short time several patients were housed in it to the great relief of their families.⁴ This is the first reference discoverable regarding the provision of any special accommodation for the insane in Canada.⁵ As

¹ St. Vallier is often spoken of in this country as being the first to interest himself in the care of lunatics.

² This river, originally known as La Petite Rivière, was named by Jacques Cartier the St. Croix, which title was afterwards changed by the Recollets to St. Charles in honor of their liberal patron, Charles de Boues, Grande Vicaire de Pontoise.

³ Old France in the New World, by James Douglas, LL. D., 2d Ed., 1906.

⁴ Histoire de L'Hôtel Dieu de Quebec, by l'Abbé H. P. Casgrain, 1878, see appendix, 562. See also, Histoire de Monseigneur de St. Vallier et de l'Hôpital Général de Quebec, 1883.

⁵ The Early Hospital History of Canada, 1535-1875, A. D., by M. Louise Meiklejohn. Montreal Medical Journal, May, 1910, Vol. XXXIX, No. 5.

only insane women were received into this house, the French Government erected nearby, at its expense, but under the superintendence of the Bishop, a house for insane men capable of receiving 12 patients.¹ To aid him in his undertaking his Lordship was granted, on the recommendation of the Governor and the Intendant, a sum of 1000 livres.

At a later date further aid was granted, as is testified to by the following translation of an extract from a memorial of the King of France to the Governor and Intendant of Canada, dated June 2, 1720:

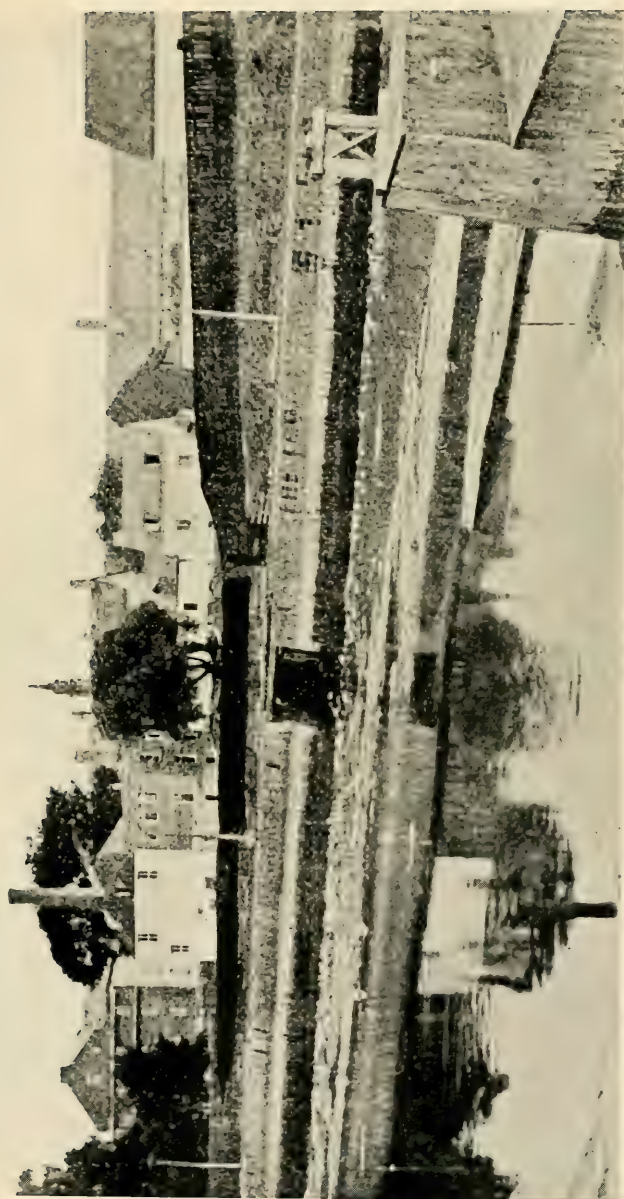
On the representation of the Bishop of Quebec that extraordinary expenses have been incurred by this hospital (the General Hospital) during the last few years, and that he has built a house for the insane and weak-minded people of both sexes, His Majesty wishes to give to the hospital some sign of his zeal for the relief of the poor, and grants him a sum of 1000 livres per annum, which shall be entered, from the beginning of this year, on the charge sheets to be paid in the colony by the "domaine d'occident"; but His Majesty desires that in consideration of this gift the Sieurs de Vaudreuil and Begon engage that the Bishop of Quebec, and the other governors and directors of the hospital, shall receive disabled soldiers of the troops of the colony. Besides, the hospital being able to get some help from them, His Majesty will cause the remittance annually of the half-pay which these soldiers have been allowed. The Sieurs de Vaudreuil and Begon to report what is done in this respect.

At the time of the English conquest this house was in a very bad state of repair. The good Sisters made some attempt to patch it up, and continued to receive a few patients. The number admissible, however, was very limited, and when the maximum was reached, other insane persons were placed in the public hospitals. Lost in the midst of a great number of sick and infirm people who thronged these hospitals, those of disordered mind could not be treated properly.

The impoverished condition of the institution and those in charge of it at this period is thus set forth in a report by General Murray, Military Governor, on the state of the Government of Quebec, under date June 5, 1762. Speaking of the General Hospital he says:

There is a community of women. They have a Foundation for taking care of 30 invalids, idiots or incurables, which they are at present in no

¹ Bulletin des Recherches Historiques, Quebec, 1895, p. 143.



THE QUEBEC GENERAL HOSPITAL ON THE SITE OF THE RECOLLET MONASTERY.

condition to fulfil, their revenue being no way equal to the expense, and as a large sum is owing them by the King of France for the sick of his army. In the time of the French they were allowed rations for as many of the above as they took in, and a pension of 2000 livres. The ladies of the Community are of the best families in Canada and by the presents they were continually receiving from them they were chiefly enabled to subsist. Their whole estate in this country does not bring them in at the most above 5000 livres.

Of the Quebec General Hospital it may be said that, since its foundation, through sieges and epidemics, for a period extending over well nigh two and a quarter centuries, its doors have ever been open, though its walls no longer shelter the insane; truly a record to be proud of.

Another, though less enduring, testimonial to the charity and religious zeal of Bishop St. Vallier was to be found at Three Rivers. Here, in 1697, out of his own personal property, he founded, as both a school and a hospital, another Hôtel Dieu, with six beds for indigent poor, and placed it in charge of the Ursuline nuns.¹ For a considerable period it gave refuge to a small number of lunatics, who, on the creation of Beauport Asylum, were transferred thither. This hospital also shared in the many vicissitudes and epidemics that visited the colony. In 1775 American soldiers afflicted with scurvy were received into it, so many that they filled the chapel, and to this day may be seen in the convent at Three Rivers American bills issued to the nuns, which, after the war, were not redeemed by the United States. After a battle fought between the English and Americans close to the town, the wounded of both armies were brought to it, and in 1776 it was used as a military hospital. Again, during the war of 1812 its services were put into requisition to receive the sick and wounded. Destroyed by fire in 1806, it was resurrected. In 1864, however, the Sisters of Providence having opened a new hospital at Three Rivers, it was deemed best to have only one in the city, and the historic Hôtel Dieu of the Ursulines was closed after an existence of over 160 years.

At Montreal, in the year 1694, yet another institution was established, which for a time was directly connected with the care of the insane. At that date two or three rich gentlemen, headed

¹ The Early Hospital History of Canada, 1535-1875, A. D., by Miss M. Louise Meiklejohn. Montreal Medical Journal, Vol. XXXIX, No. 5, May, 1910, p. 308.

by a Monsieur Charon, proposed founding a hospital for the relief of the sick and aged poor. The establishment began under the most flourishing auspices, to wit, the hearty good will of the Diocesan Bishop and a grant of land from the Sulpicians, who were the Seigneurs of the island, which land extended from Foundling Street to the banks of the St. Lawrence. The grant was made with the proviso that if, at any future time, the said hospital should cease to exist, the whole premises should revert to the Ecclesiastics of the Seminary of Montreal. The Royal sanction was obtained under letters patent granted April 15, 1694, by His Majesty Louis XIV to Sieur Charon de la Barre, in which the establishment is styled "General Hospital of Ville-Marie." The citizens in general, whose circumstances enabled them to aid, contributed liberally to the good work, and the hospital was at once erected and put into operation.

Under the management of M. Charon, the first Superior, the institution made rapid progress in prosperity and importance, additional powers being given to the managers of the establishment, under the title of Frères Charon. After the death of M. Charon, his successor proved to be a man ill-qualified to direct the affairs of the establishment, and many of the brotherhood withdrew from it, till only two or three friars were left. On examination it was found that the hospital was over £2000 in debt. Under these circumstances the whole estate was, in 1747, handed over to the Seminary of St. Sulpice. Soon after the direction of the institution was entrusted by the Seigneurs Administrators of the Seminary to a small society of ladies, under the superintendence of one Madame Youville,¹ who turned it into a home for men and women,

¹ This lady is described in *Hochelaga Depicta*, published at Montreal, in 1839, as having been the daughter of Christopher Duffort, a native of Brittany and captain of a troop of cavalry, and a Miss Gauthier of Varennes, a village near the Island of Montreal. She had married in early life a Canadian gentleman, M. Francois de Youville, and being left a widow when twenty-eight years of age, retired from the world and devoted herself and her patrimony to acts of charity. Meeting with some other ladies, whose minds were congenial to her own, they agreed, in 1737, to unite in works of charity and place their revenues in a common fund for that purpose. They bound themselves by vows as religious recluses and irrevocably devoted themselves to the service of the poor. The members of the order of which this was the nucleus are usually known as Grey Nuns (from the grey and black habit adopted by them) or Sisters of Charity.

and we find in a request made by the Sulpician Fathers to this end that Madame Youville received the sick, the aged and incurable, orphans, and the insane.¹

On the 3d of June, 1753, the association received the King's sanction for the transfer to them, under the title of Sisters of Charity of the General Hospital, of the rights and privileges granted the "Hospitalier Brothers (Frères Charon) by letters patent in 1694."

Shortly after this the nuns, to meet the request of the Sulpicians regarding the care of the insane, erected several wooden structures in the hospital court for their accommodation. In 1801, however, the government, when offering the Sisters the charge of the insane, built for them eight stone buildings to replace the wooden ones. These remained in use up to 1831, when the nuns gave up this portion of their work.

On the 18th May, 1765, the hospital was almost completely destroyed by fire, and the Sisters with their family of unfortunates were left without a home. With aid from the Seminary St. Sulpice and other religious communities, however, they were sheltered and supported till, Phoenix-like, the institution arose anew from its own ashes. In course of time the rapid growth of the city made it well nigh impossible for the Sisters to retain their ancestral home—the cradle of their religious life. Accordingly, a change of quarters was decided upon and a new location selected. This consisted of the square of land bounded by Guy, Dorchester, St. Matthew and St. Catherine streets. In 1869 work was begun on the new structure, which was occupied in October, 1871.

Up till toward the close of the 18th century the government of the province made no regular or systematized provision for its insane. Their care by the various religious institutions had been voluntary, though from time to time varying sums had been granted these for the support of lunatics and foundlings and the repair of buildings, etc. About the period referred to, an Order in Council was passed authorizing an appropriation for the maintenance of insane persons in the province of Lower Canada, at a fixed rate of £32 10s. each per annum (approximately one shilling

¹ This request is now in the archives of the Grey Nuns at Montreal.

and eight pence per diem). Under this order the insane were entrusted to the care of certain religious communities in the districts of Montreal, Three Rivers, and Quebec. This was practically the beginning of the much and justly decried "farming-out" system,¹ which, it is to be regretted, is still existent in the province, though in a much modified and improved form. This improvement consists in the fact that the hospitals are now officered by governmentally appointed physicians. These gentlemen are paid by the province, and to them is relegated the entire management of the institutions as regards admissions, discharges, and all matters pertaining to treatment, both medical and moral. They also have the power to report to the government anything they may deem amiss, or that should, in their opinion, be improved if their requests to the proprietors are not complied with. In addition, there is a Board of Inspectors, also appointed by the government, who are required to make regular visits to and inspections of the various hospitals, reporting their findings to the Hon. Provincial Secretary, in whom is vested the control of asylums.

That the religious communities had no adequate means of properly caring for those entrusted to their charge, in the early days of the contract system, and the care bestowed upon the

¹ Of this system Dr. D. Hack Tuke thus freely expresses his opinion in his work, "The Insane in Canada and the United States," written after a visit paid to the Quebec asylums in 1884: "The system involves the possibility of their (the patients) being sacrificed to the interests of the proprietors. It has the disastrous tendency to keep the dietary as low as possible, to lead to a deficiency in the supply of clothing and to a minimum of attendants, thus inducing a want of proper attention to the patients and an excessive resort to mechanical restraints, instead of the individual personal care which is so needful for their happiness and the promotion of their recovery." The world-renowned alienist, Professor Kraepelin, speaks of it in no less scathing terms, and Dr. James Douglas says of it in his "Journals and Reminiscences of James Douglas, M. D." (his father), with regard to the inadequate sum per head paid by the government for the care of the insane, who should be wards of the state: "The more the government beats down the contractor, the more he is compelled to meet the cut by economies which must be made out of the well-being of the patients; and if additional buildings have to be erected, they must almost inevitably be planned and constructed with the view to cheapness rather than the highest hygienic principles and perfect safety from fire."

unfortunate victims of insanity was sadly deficient, is evidenced by numerous grand jury and special reports. Nor are the good Sisters so much to be blamed. They acted according to their means and light. They were not rich in worldly possessions, and the good deeds wrought by Pinel, Tuke and Conolly had not yet become known throughout the world. In addition, it must be said in justice to them that they repeatedly urged the pressing necessity of better accommodation for the lunatics under their charge, and asked to be relieved of the responsibility.

The deplorable condition of the insane in the province, the wretchedness and misery of their surroundings, with lack of proper care and medical treatment, are vividly set forth in a report made by a special committee of the Legislative Council of Lower Canada, published in 1824.¹ This committee consisted of the Honorable Messrs. Richardson, Cuthbert and Bell, to whom were afterwards added the Honorable Messrs. Duchesnay and Coffin. These gentlemen were directed to enquire into the establishments for the reception and cure of the insane, for the reception and support of foundlings, and for the relief and cure of sick and infirm poor; to enquire into the purposes for which public monies have been expended; and to report, "whether one lunatic asylum for the whole province, adapted to the improved modern system of treatment of the insane, be not an establishment called for by every principle of humanity; and if so, what the erection would probably cost." The lengthy report submitted by the committee gives various interesting statistics and other details concerning the insane confined in the Hôpital Général at Quebec, the Hôpital Général at Montreal, both of which establishments were under the charge of the Grey Nuns, and in the Hôpital of the Ursulines at Three Rivers. It also contains supplementary appendices giving copies (in both English and French) of the questions and answers submitted to the heads of these three hospitals, to their attending physicians, to the sheriffs of the three districts regarding the confinement of the insane in jails and houses of correction, and a report made by Dr. Hackett, of the Quebec General Hospital, in 1816, to His Excellency Sir John C. Sherbrooke, K. G. C., on the subject of the insane.

¹ Fifth Geo. IV. Appendix No. 1 to Report to Legislative Council, 10th February, 1824, by special committee.

The report shows that there was expended for the purposes aforesaid in the districts of Quebec, Montreal and Three Rivers, from 1800 to the end of 1823, a total of £72,102. 11s. 1d. currency, of which sum £17,500. 9s. 11d. was devoted to the care of the insane.

Further, the report says:

By the returns received from the Three Nunneries respectively there are at the Hôpital Général, Quebec, where the insane are attended gratis, by Dr. Holmes, senior, 18 lodges or cells (12 whereof have been built at the public expense), for confinement of persons labouring under that deplorable malady, of the size of about 8 feet long by 7½ feet broad, and 8 feet in height, exclusive of 6 cells of a much better description called by the commissioners moral cells (also built at the public expense), about 9 feet square and 9 feet high, for patients in a state of mental disease less violent. Sixteen persons are now confined in the whole at Quebec, and since 1800 the total number has been 66 males and 45 females, whereof 35 males and 21 females died in that period; and 22 males and 17 females have been discharged as cured or relieved. The committee personally visited the above hospital and found everything that regards the management well conducted and the moral cells neat and clean; but the others, although lately much improved, are in their nature such as to preclude the possibility of treatment of persons confined therein, upon a regular system with a view to cure.

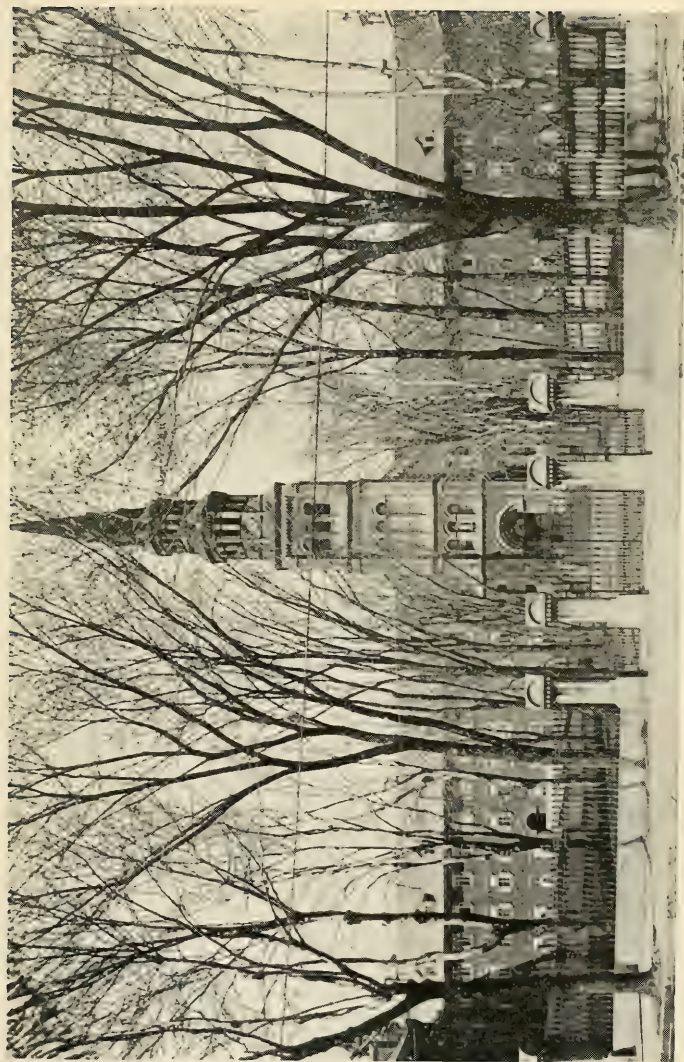
There are at the Hôpital Général or Grey Sisters' Nunnery, Montreal, where the insane are attended gratis by Dr. Selby senior, 8 cells of the size of about 8 feet long, 6 feet 3 inches broad, and 7 feet 10 inches high. Since 1800 there have been received and confined there 84, whereof 6 are now remaining therein; 29 have died, and 49 have been discharged as cured or relieved.

At the Ursulines, Three Rivers, there are 6 cells, of the size of about 8 feet long, 6 feet broad, and 8 feet high. The whole number confined there have been 12, whereof 5 have been discharged, and 4 now remain confined.

Each of the above cells is intended for one inmate, who is solitarily confined therein, day and night, with few exceptions, and only removed therefrom to another cell when it is cleaning.¹

The cells have each a small glazed and grated window in the outside wall, of about a foot square; and in the passages there are openings above each door, also grated. Through these windows light is admitted, and, when opened, air. There are stoves in winter in the adjoining passages,

¹ The evidence taken was to the effect that such removal for the purpose of cleaning out the cells and the changing of the patients' clothing was made only once in eight days.



THE GREY NUNNERY, MONTREAL.

which heat the cells; and in summer a window at each end of the passage admits air; but the ventilation must be very imperfect.¹

Neither the cells nor attendants on insane patients confined therein, can allow of the enjoyment of external air or exercise, nor of moral or even medical treatment, upon any system affording a hope of mental cure. They are simply places of confinement, without the possibility of beneficial effect upon the unhappy persons afflicted with the dreadful malady of insanity further than placing them out of the reach of danger to others, and diminishing that to themselves which would result from their personal freedom. Indeed, they rather resemble places for criminals (the said six moral cells at Quebec excepted), and are more likely to produce or increase insanity than to cure it.²

Since 1800, by the above-said returns, there have been confined in the cells of the three districts 207 insane persons, whereof 93 have been discharged, 88 died, and 26 remain confined. Such part thereof as may have been apparently cured or relieved must have proceeded from constitutional or accidental causes, and not from benefits attendant on moral or medical treatment during their confinement in those miserable abodes.

In the year 1818 there was granted the sum of £2500 currency for erecting additional cells and making repairs at the General Hospital of Quebec, and £336 since for other repairs thereto. And in 1818 £2000 for the like purpose at Montreal.

The ladies of the Hôpital Général there, and Doctor Selby senior, the attending physician, to their honor declined to receive the £2000, as it would increase what is in itself bad and inadequate to the object.

It is therefore deeply to be regretted that so much public money should have been expended in the several districts upon these miserable expedients, in lieu of an establishment for the insane; when by the application of that money to the same humane object upon a proper principle, a lunatic asylum might have been erected calculated to do honor to the province, instead of being a reproach.

¹ This must necessarily have been the case, as in the evidence taken it was shown that an open trough in each cell, leading into a common drain, was the only means of carrying off the excreta.

² The committee exonerated the religious ladies from all blame, as they were acting up to their light, and each hospital was under the charge of an eminent medical man. The Reverend Lady Superioress of the Three Rivers establishment, when asked the question as to whether the treatment and accommodations were calculated to assist in the cure of the patients, sincerely answered that "the insane receive the treatment proper for their cure, and their accommodation is such that they can be treated in a manner to relieve their suffering, which is done with the tenderest care." This opinion was expressed just after the Lady Superioress testified that the insane were immured night and day in the same cell, but that one of their four patients was sane enough to be permitted to take the air and some exercise for a few days each month.

In the treatment of the insane in other countries, a great and happy change has been wrought of late years—coercion and confinement beyond that which may be indispensably necessary in special cases are proscribed; and mildness of treatment, with enjoyment of air, exercise and amusement out of doors, and comforts within, are substituted where practicable, with the happiest effects. To each asylum, a considerable portion of ground is attached for those purposes.

The security consistent with the safety of the insane, their connections and general society, can hardly ever, in the heartrending circumstances attendant on mental derangement, be enjoyed in the dwellings of private families; removal from home therefore is generally necessary, in most cases is desirable, and tends to destroy or weaken the morbid associations.

The committee find that the want of a public lunatic asylum impedes the administration of justice by obliging the judges, from necessity, to condemn insane criminals, when convicted, to be confined in the common jails and houses of correction, where their situation is deplorable to themselves, and a nuisance to the other persons confined therein, besides interfering with the classification of prisoners. The turnkeys and keepers in those establishments cannot be expected to possess qualifications requisite for the management of insane persons. Three of that description are now in the jail at Quebec; seven in the jail and two in the temporary house of correction at Montreal. None at Three Rivers at present.

With a view to general utility and economy, the benefits of a lunatic asylum should be extended to the whole province, and not confined to districts. Indeed, it might embrace both the provinces of Canada, in contribution to the expense and enjoyment of its advantages.

This being a general object of great importance, a portion of the public revenue could, with great propriety, be applied to the purchase of the ground, erection of the building, and annual support of the establishment. The site should be healthy, and in the neighborhood of a populous town, but at such a distance as to possess the advantage of retirement, yet admit of the benefit of medical aid, and enable the institution to be regularly visited, which is of much moment.

After describing in detail the lunatic asylum at Glasgow, Scotland, and recommending this as a model, the report continues:

The committee, therefore, cannot but confidently hope in the means being supplied by constitutional authority for the establishment of an institution recommended by the best feelings of our nature, as no human being can be considered exempt from insanity, that awful visitation of the Almighty.

In their final resolutions the committee further said:

Resolved, as the opinion of this committee; that the cells appropriated to the insane in this province do not admit of properly applying either moral or medical treatment, with a hope to a mental cure of the unhappy persons confined therein, and are more likely to produce or increase insanity than to remove it.

Resolved, as the opinion of this committee; that humanity loudly calls for the establishment of a lunatic asylum for the whole province, or for both provinces, for the reception and treatment for cure of the insane, upon the improved modern system, as also for the ultimate care and support of such as are incurable, and that such asylum should be erected in the neighborhood of one of the populous cities of this province, so as to have the benefit of medical aid and adequate frequent visitation.

Resolved, as the opinion of this committee; that the monies which have been expended for the confinement and support of the insane in this province since the year 1800 would have sufficed for the erection of a lunatic asylum that would have done honor to the humanity and philanthropy of the country.

Dr. Hackett in his letter, previously mentioned, to Sir John Sherbrooke, in 1816, portrays in detail the inadequacy of the treatment of the insane possible in the Quebec General Hospital, and concludes as follows:

The impracticability, at present, of adopting even any part of the modern improved plan of treating the insane, will be obvious to Your Excellency; therefore, under existing circumstances, I conceive medical treatment perfectly useless, and any attempt at moral, not only absurd, but, in truth, bordering on the ridiculous.

(Signed) W. HACKETT, M. D.

This report was published, but, despite the distressful state of affairs shown to exist, no action was taken by the government for more than 20 years thereafter.

Sir Charles T. Metcalfe was appointed to the Governor-Generalship of Canada in 1843, and in his first address to the House at the opening of the session, dilated largely on the urgent necessity of an improved system for the treatment of the insane.

At the same session the Hon. T. C. Aylwin gave notice of his intention to present a bill for the better care and treatment of lunatics. On account, however, of the pressure of other business the said bill was not introduced.

During the recess the government caused the various houses accommodating insane inmates to be inspected, and had estimates made as to the cost of their removal to the country, their maintenance in a special institution, and their medical treatment.

At the next session of the Legislature the government again called the attention of the House to the subject of the insane, but the session was short, and it was found impossible to take the matter up.

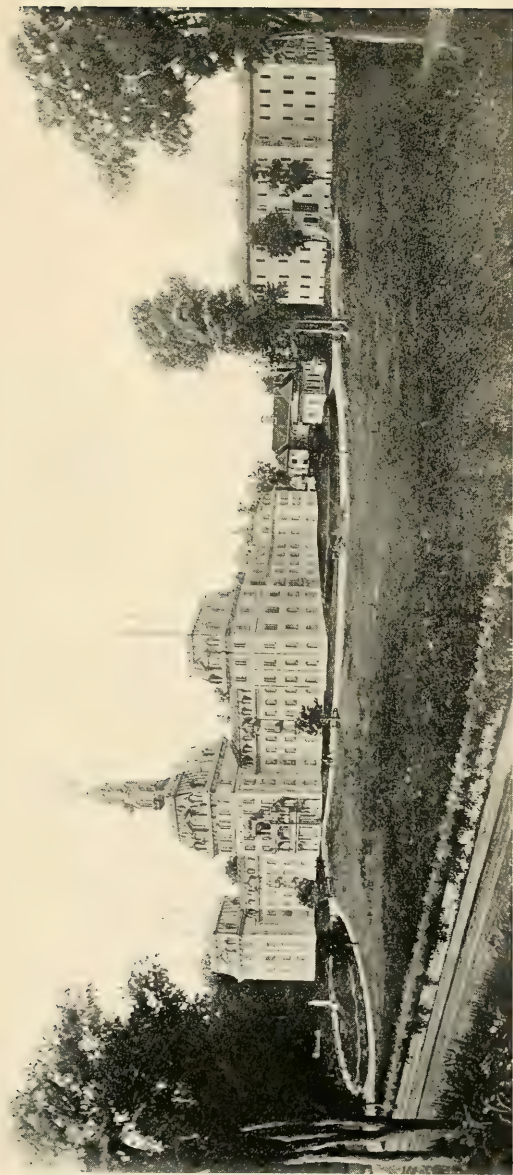
By 1845 the number of insane had increased to such an extent that the provision of a special institution for them had become a crying necessity. The grand jury made a very strenuous report on the subject, pointing out in no measured terms the disgrace to the province attendant on the existing state of affairs. As a result His Excellency entered into an arrangement with Dr. James Douglas, of Quebec, who agreed to take charge of the insane for a period of three years on the understanding that the government would then have a suitable place provided for them. Since that time they have received much better care, but the vicious system of "farming-out," which had existed so long, was perpetuated in the province, owing to the urgent demand for immediate action.

Quebec is the only one of the provinces of the Dominion in which there are no state institutions for the care of the insane, its provision for this unfortunate class consisting of four proprietary establishments and one incorporated charitable institution. The former are the Quebec Lunatic Asylum, St. Jean de Dieu Asylum, St. Julien Asylum, and Baie St. Paul Asylum; the latter is the Protestant Hospital for the Insane, situated on the outskirts of Montreal. There is in addition an establishment for private patients, known as St. Benedict Joseph Asylum.

BEAUPORT ASYLUM.

Beauport, or the Quebec Lunatic Asylum, now officially designated St. Michel de Beauport Asylum, is the oldest of the Quebec institutions, having entered upon the 71st year of its existence.

As aforesaid, in 1845 the demand for increased and improved accommodation for the insane had become imperative. The government, however, was unwilling or unable to undertake the erection of a special institution. Under these circumstances, Lord Metcalfe, then Governor-General of Canada, entered into an agreement with one of the leading medical men of the City of Quebec, Dr. Jas. Douglas, who undertook to provide for the unfortunates for a period of three years. Dr. Douglas associated with him in the enterprise, as partners, two other prominent Quebec physicians, Drs. Fremont and Morrin. Lord Metcalfe warmly encouraged the project by promising the support of the government, also undertaking the removal to the proposed establishment, when



BEAUFORT ASYLUM IN 1877.

fitted up, of all the lunatics then confined in the General Hospital at Quebec, the nunnery at Three Rivers, and the jail at Montreal.¹

The proposers of the scheme at once set about its accomplishment. To this end they acquired by lease from Colonel Gagy, M. P. P., a property known as Danoe, once the manor-house of M. Giffard, seigneur of Beauport, built in 1634. It was situated in the parish of Beauport, whence the name of the asylum, two and a half miles from the city, and comprised about 200 acres of land commanding a magnificent view of the city and harbor of Quebec. There was in addition to the family mansion, which was a large two-story stone edifice, an extensive block of out-buildings, also of stone.

By the 15th of September, 1845, the establishment had been prepared for the reception of 120 patients, and on that date the lunatics in charge of the religious ladies of the General Hospital of Quebec were removed thither. They numbered 23. Of these poor creatures, one had been confined 28 years, and several upwards of 20 years, in small, dark stone cells, which they had never been allowed to leave. Their delight upon again being restored to light and comparative freedom can well be imagined. The story of the removal and its results is thus dramatically given in the first report of the proprietors, published at Quebec in January, 1849:

They were removed in open carriages and in cabs. They offered no resistance—on the contrary, they were delighted with the ride; and the view of the city, the river, trees, and the passers-by excited in them the most pleasurable emotions. On their arrival at the asylum at Beauport they were placed together at table for breakfast; and it was most interesting to witness the propriety of their conduct, to watch their actions, to listen to their conversation with each other, and to remark the amazement with which they regarded everything around them. All traces of ferocity, turbulence and noise had suddenly vanished; they found themselves again in the world and treated like rational beings; and they endeavored to behave as such. One, a man of education and talents, whose mind was in fragments, but whose recollection of a confinement of 28 years was most vivid, wandered from window to window. He saw Quebec

¹ After the abandonment of the care of the insane by the Grey Nuns of Montreal, in 1831, lunatics of the district were confined in the jail. This structure was destitute of almost every requisite for an asylum. It was surrounded by buildings, there was no land on which the patients could be employed, the yards were insufficient for exercise, and, moreover, the building was required for its more legitimate purposes.

and knew it to be a city; he knew ships and boats on the river and bay, but could not comprehend steamers. Before leaving the General Hospital the nuns had clothed him well and given him a pair of shoes. He remarked that he had been a long time shut up, and that it was 19 years since he had last seen leather. Another, a man who had been confined 20 years, and who had always evinced a turbulent disposition, demanded a broom, and commenced sweeping; he insisted on the others employing themselves also. He observed: "These poor people are all fools, and if you will give me a constable's staff, you will see how I will manage them, and make them work."

As soon as their muscular powers were sufficiently restored the patients were induced to employ themselves in occupations the most congenial to their former habits and tastes. Some worked in the garden; others preferred sawing and splitting wood. The female patients were taken out daily, and many of them engaged in weeding the garden.

The effects of this system were soon apparent in their improved health and spirits; they became stronger, and ate and slept better. Some of them were restored to reason. One had been confined many years in a cell in the General Hospital; 13 months after his removal to the asylum at Beauport he was restored to his family and friends; another had also been an inmate of a cell several years, and after her discharge from the asylum engaged as a school teacher. The other patients generally, though greatly improved, afforded small prospect of recovery. . . . It is, however, gratifying to be able to state that of all those removed from the General Hospital to the asylum at Beauport, one only has been subject to even temporary restraint.

On September 28, after the arrival of the Quebec contingent, the patients confined in Montreal jail, 52 in number, were transferred to Beauport, followed, on October 5, by those in Three Rivers, numbering seven. The condition of the latter was much more wretched than that of those from Quebec and Montreal. Some of them had been for years kept fastened to staples driven into the floors of their cells, and all arrived at Beauport chained and handcuffed. For a picture of one of this detachment we are indebted to the same source as before referred to:

One of these patients, a Canadian, and a powerfully made man, was pointed out by his keeper as being extremely violent and dangerous. He strongly opposed his being unfastened; this, however, was done on board of the steamer and he was conducted to a cab, which he entered without any opposition or reluctance. He answered to the name of Jacques, but could give no account of himself whatever. He had been picked up in the woods on the River St. Maurice, with his feet frozen, and had been confined in the cell at Three Rivers during a period of seven years. A few days after his removal to Beauport, observing a man sawing wood, he

pushed him aside, took the saw and used it himself; this seemed to afford him great pleasure. When not so employed out of doors his constant amusement was in fishing. He would stand for hours together as if using a rod and line, and sometimes as if fishing through a hole in the ice. He was found to be quite inoffensive and harmless. He died of diseased lungs on the 7th of March, 1846. Soon after his death, his brother and son arrived from the neighborhood of Montreal in search of him, being attracted by a notice in the public prints, that an insane man, who could give no account of himself, had been found wandering in one of the parishes below Quebec, and sent to the asylum at Beauport. His friends stated that Jacques had escaped from their charge several years before and that, not being able to trace him or gain any tidings of him, they concluded that he had perished in the woods.

The agreement of the proprietors of Beauport with the government was that they should be paid at the rate of \$143 annually for each public patient, said sum to include board, lodging and medical treatment. The last was immediately directed by Dr. A. Von Iffland, who was appointed resident physician. This position he retained up to 1849, when he resigned to take charge of the Marine Hospital at Quebec.

Being subsidized by the state, the establishment was placed under the supervision of a board of commissioners, composed of Hon. Louis Massue, Hon. John Neilson, Joseph Painchaud, M. D., James Gibb, Esq., Peter Langlois, Esq., Henry Jessop, Esq., and John Irvine, Esq.¹ On the assembly of the commission, Mr. A. Lemoine was appointed secretary.

The first contract of the proprietors with the government for the care of the insane from the different districts of Lower Canada, which had been for a term of three years, expired October 1, 1848. On its renewal for a further period of seven years, they determined to seek fresh quarters for their charges. This step was rendered necessary by the fact that the original building was capable of accommodating 128 patients only, whereas the number on the date of the expiration of the contract had reached 130, with every prospect of a speedy increase. A fine property of 170 acres belonging to Judge de Bonne, lying near the St. Lawrence, was accordingly purchased. It was located in the parish of St. Roch, on the "Chemin de la Canardière," about a mile from the parent institution. Here, in 1848, was begun the erection of a new

¹ Canada Gazette, Montreal, February 16, 1846, p. 2574.

asylum, which was opened in April, 1850. The building, which had a capacity of 275 beds, was constructed of gray, coursed limestone, was roofed with slate, and surmounted by a dome and lantern. It was a two-story structure, with basement and attic, consisting of a central portion and wings, the whole giving a frontage of 418 feet. The cost of land and buildings was upwards of £12,000. With the change of location the name of the establishment was altered from Beauport Asylum to the Quebec Lunatic Asylum.

That Dr. Douglas was well abreast of the times and fully realized the value of non-restraint in the care of the insane is proven by the following extract taken from his second report, issued in 1851:

With regard to restraining apparatus, the mitts have been abandoned, and the only restraint now used is the leather body strap, and this for the purpose of preventing the patient injuring himself—never for the purpose of preventing him from injuring others. The less restraining apparatus is used, the more vigilant and watchful do the attendants become. In the almost entire disuse of restraint, we may observe that no successful suicide has taken place, and no serious injury has at any time been inflicted by any patient, either on himself or on others.

In the third and fourth reports, issued in 1855 and 1858, the managers complain greatly with regard to the crowding of the wards with incurables, saying that as these could not be made useful at home, they were foisted on the public. In this way recent cases were crowded out by chronics. Notwithstanding their representations, patients were forced upon the contractors far in excess of accommodation.

In February, 1854, the western, or female, wing of the building was destroyed by fire. Providentially, the conflagration was unattended by loss of life. Through the kindness of the government the patients, numbering 98, were accommodated in a part of the Marine Hospital, where they remained up to May following. At that date they were transferred to a large two-story stone building adjoining the asylum premises, leased for the purpose and subsequently purchased from Mr. O. L. Richardson. This new addition, or annex, was sometimes known as the "White House," from its being brilliantly whitewashed; sometimes, as the "Richardson House," from the name of its former owner. In

the meantime; a contract had been let for rebuilding the wing destroyed. The work was pushed rapidly on, and the women were soon enabled to take possession of their new home, the "White House" being reserved for the reception of male patients of dirty habits.

At the close of the year 1859 the asylums and prisons of the united provinces of Upper and Lower Canada were placed under the control of a board of inspectors.¹ Beauport, however, as private property and in all matters of internal economy subject to the proprietors only, passed but partially within the jurisdiction of this board. The members thereof had no power to give orders respecting its management, their duties being limited to inspecting and making report of its condition to the Governor-General. In compliance with this duty the inspectors, in their first report, complained of the overcrowded condition of the institution, and strongly urged the necessity for the foundation of another asylum for the western part of the province. The services of a resident physician having been dispensed with, the board also regretted the want of such an official. Speaking on this subject, Mr. Taché reported as follows:

This asylum would require a resident physician specially devoted to the cure of insanity, to be exclusively charged with the care and direction of all curative measures. True, the two proprietors of this establishment are medical men, and men of note in the practice of the profession, and one of them resides in the immediate vicinity of the asylum, but both have other and numerous occupations, which, of necessity, divert them from that constant application of mind and uninterrupted observation of their charge which all men who have devoted themselves to this specialty declare to be indispensable to the scientific management and treatment of mental alienation.

Every lunatic asylum has one or several physicians living in the midst of the patients, seeing them several times every day, and awaiting, as it were, at its transit the proper moment for a beneficial application of the teachings of science. I see no reason why it should continue to be otherwise here.²

The want thus plainly set forth was remedied in 1863, when the proprietors once more appointed a resident physician, Dr. L. Catellier.

¹ Consolidated Statutes of Canada, 22 Vict., Cap. 110.

² Report of the Board of Inspectors of Asylums, Prisons, etc., for 1861, p. 44.

In 1860 Dr. Morrin disposed of his interest in the establishment to Drs. Douglas and Fremont, and, the latter dying in 1862, his share was purchased from his representatives by Dr. J. E. Landry. Under the new management, that of Drs. Douglas and Landry, extensive improvements to obviate the overcrowding which the inspectors had complained of were determined on. These improvements, which consisted in the reconstruction of the main building and the erection of two additional wings, were begun in the spring of 1862. In January, 1864, the new premises were occupied, the asylum then consisting of a central portion four stories high and wings of three stories, joined to the central or administration part by connections of two stories with attics. From the wings extensions projected backward, the whole forming three sides of a quadrangle.¹

The institution as thus reorganized, although offering comfortable accommodation for 450 patients, was soon again found inadequate to meet the ever-increasing demands for admission. The proprietors, accordingly, in August, 1864, began the erection of a large detached building, capable of housing 300 inmates. It was designed to occupy the site of the annex known as the "White" or "Richardson House," which had to be pulled down to make way for it. In consequence of this, some of the 90 patients lodged therein had to be crowded into the main building, and others received in a cottage originally intended for the family of one of the officers. Work was pushed forward so vigorously that by April, 1865, the building was sufficiently advanced to admit of the removal to it of 100 patients from the main asylum. By September of that year the edifice was completed. The new structure, which contained within itself all the requirements, such as kitchen, airing courts, etc., of an independent asylum, was devoted exclusively to men, the main building being reserved for women. Fifty acres of land were at the same time added to the property by purchase, bringing the total area up to 225.

In reporting on this new annex and the additions made to the main structure in 1863, the inspectors strongly condemned the

¹ In connection with these extensive building operations at the expense of the proprietors, it is to be observed that the government never obligated itself to buy the real estate of the contractor at the termination of a contract.

system adopted of placing the dormitories, like prison cells, back to back, with no light other than that coming from the corridor in front of them through small openings in the doors. As a result we find one of their number, Mr. J. M. Ferres, in 1864, plainly expressing his views in the following terms:

When the additions referred to were first spoken of it was expected by the Board that the deplorable overcrowding, which had been one of the distinguishing features of the old buildings, would be at once relieved. In this, however, the inspectors have not only been disappointed, but the erection of the additions appears to have been made an excuse for jamming into the enlarged establishment unfortunate beings, in still greater proportionate numbers, than there previously were in the old one. Matters, therefore, instead of being ameliorated, had become worse in respect to numbers, and much worse in respect to the supply of fresh air.

Mr. Inspector Meredith and myself having made an inspection together on the 8th September, took, at the same time, a measurement of all the rooms then occupied as dormitories, when we found that many of them did not afford more than 350 cubic feet of air to each patient, and none of them 500. As all writers are agreed that a space of not less than 800 cubic feet should be given to each patient, *with good ventilation*, an idea may be formed of the miserable position of so many unfortunate creatures cooped up in pens, in cellars and garrets. The facts which we became acquainted with at that visit induced me to examine more particularly than I had hitherto done into the condition of this asylum, and tended much to change the opinion I had previously formed of its management.

At the date of my appointment as a member of the Board of Inspectors the institution was in a very overcrowded state, and, considering that state, I was quite ready to give every credit for the care, cleanliness and other marks of attention at all times visible.

I accepted also the great excess of the population above the capacity of the buildings as an existing fact, without speculating very *particularly* as to its cause. But when an enlargement of the buildings took place, professedly for the very purpose of giving relief to the pre-existing excess, I was somewhat taken by surprise to observe that it was accompanied, even while the works were advancing, with a continued addition to the numbers, so that when it was fully completed the same and indeed worse overcrowding still remained.

The thought then began to be forced on me that the interests of the lunatics, their health and comfort, were of secondary consideration throughout. The proprietors give their assurance of their having informed the government that their institution is and has been much over-populated, and I have no reason, of course, to doubt the assurance, and it may have been with great compunction that physicians who know the effects upon lunatics of congregating them at night in cribs erected in badly ventilated rooms, under such circumstances, consented to what, as professional men, they condemned. I venture to think, also, that if the government were

made sensible that the purely idiotic patients who now encumber so much the Beauport Asylum could be safely taken care of by their relatives at home, and were made aware of their hopelessly incurable state, as well as of the injury which their presence does to the curable insane, the proprietors would be relieved of further pressure on the part of the government to undertake what, professionally, they feel they ought not to do.

I should have been glad to see the proprietors gradually removing those miserable patients who occupy the confined cells in the garrets of their establishment into rooms deserving the name of dormitories, instead of their being obliged to continue locking them up in such places, by continuing to receive new patients beyond their means to accommodate them.

Let the responsibility of this overcrowding rest where it may, I cannot but condemn the fact as it exists, and it is much to be hoped that the present state of things may be soon put an end to.¹

A year later the inspectors as a body thus proclaimed their disapproval of what is known as the "farming-out" system:

While the inspectors cheerfully and thankfully admit that the Beauport Asylum has been an immense boon to the country, they cannot conceal their conviction that the principle upon which it is established is an erroneous one. The farming out of lunatics to private persons is, in their opinion, as a general rule, most objectionable. In asylums supported by the state, the medical superintendent in charge of the institution has no interest which conflicts with the interests of the patients committed to his care; but in proprietary asylums the case is far otherwise. Here it is plainly the interest of the proprietors or contractors to spend as little as possible upon the food and maintenance of the patients, and to get as large a return as possible from them in the shape of labour; on the other hand, it is to the interest of the patients that they should be fed liberally, even generously, and that they should never be expected, much less compelled, to labour harder or longer than they wish. A system can hardly be expected to work satisfactorily where the interests of the parties concerned are so essentially at variance.²

During 1865, in addition to the Board of Commissioners, which still continued in existence, and the Board of Inspectors, the government decided to assign a visiting physician to Beauport, said officer to be named by the Governor-General, but paid by the proprietors. Dr. F. E. Roy was accordingly appointed to the position, but at the close of the year he became a part proprietor of the institution in the place of Dr. Douglas, the last survivor

¹ Report of the Board of Inspectors of Asylums, Prisons, etc., for 1864, p. 58.

² Fifth Annual Report of the Board of Inspectors of Asylums, Prisons, etc., for the year 1865, p. 6.

of the original founders, who sold out his interest in the establishment and retired.¹ Dr. Roy was succeeded as government visiting physician by Dr. A. Jackson.

After his retirement in January, 1866, Dr. Douglas lived for a time in a residence that he had erected for himself near the asylum, but in 1875 he sold this to Dr. Landry and removed with his son to Phoenixville, Pa., and later to New York, where he died in 1886.

The records of patients, as kept at this time in Beauport, were of the loosest, nor were the proprietors altogether to blame, as evidenced by their complaining in their annual report for 1866 that in cases sent to them from jails they were rarely furnished with any information other than the name of the patient. This cause of complaint was stated to have existed for over twenty years, and, as a consequence, there were many patients in the asylum about whom literally nothing beyond the name was known, and not always that to a certainty. They, therefore, asked the government to insist that the jail surgeons should send a proper history of each case, setting forth duration of attack, probable cause, degree of heredity, etc. This was done, the result being a great improvement in the statistical registers of the asylum.

At Confederation, the old Board of Inspectors ceased to exist as regarded the supervision of lunatic asylums, which became purely provincial institutions. It was replaced by a new one, appointed by the government of the Province of Quebec. This was composed of three members, namely, Dr. L. L. Desaulniers, president; Henry H. Miles, Esq., LL.D., secretary; and M. Boucher de la Bruère.

On January 29, 1875, Beauport was again visited by fire, the work of an insane woman, this time unfortunately with fatal results. As before, the women's department was the scene of the conflagration, which resulted in the death of 26 of the inmates, and the destruction of much of the main edifice. The patients thus deprived of shelter were housed in the various outbuildings and cottages of the employees while the work of reconstruction

¹ That this retirement was not voluntary, but forced upon him by political chicanery, is clearly set forth by Dr. Douglas' son, Dr. James Douglas, of New York. *Vide* "Journals and Reminiscences of James Douglas, M. D." Edited by his son (James Douglas, LL. D.) and privately printed. New York, 1910, pages 213, 214 and 215.

was proceeded with. No time was lost, and by the end of September the building was again habitable. In reconstruction, the former plan was adhered to, but the central, or administration, portion was raised to five stories, with mansard roof. Alterations and additions to the wings and rear extensions were also made whereby the outward appearance of the institution was greatly improved.

In November, 1879, the Board of Commissioners, in existence since the inception of the establishment, was abolished, and an additional visiting physician appointed in the person of Dr. A. Vallée.

About 1880 differences began to arise between the government on the one hand and the proprietors of Beauport and the more recently created St. Jean de Dieu Asylum on the other. These differences had reference to the care bestowed upon the patients by the proprietors and the degree of governmental supervision to be exercised over the admissions. That the complaints of the government were not without cause, was clearly shown through a report made by Dr. D. Hack Tuke, of London, Eng. This world-renowned alienist, after visiting the asylums of the province in the summer of 1884, arraigned in no measured terms the "farming-out," or contract, system, the general care given the patients, the excessive amount of restraint employed, and the lack of power vested in the government visiting physicians.¹

This exposé by Dr. Tuke led the Medico-Chirurgical Society of Montreal to pass a series of resolutions condemning the condition of the asylums, and calling upon the government to institute a thorough investigation and to take action thereon. This was done, and in 1885 an act was passed placing the medical control of these establishments in the hands of the government, which reserved to itself the appointment of a medical superintendent and assistant physicians for each of them.² These officers, in each asylum, constituted a medical board, to which was given supreme control in all matters relating to the admission and discharge of patients. The care and treatment of the inmates were also placed under its direction, the proprietors being bound to carry out all

¹ *The Insane in the United States and Canada*, by D. Hack Tuke, M. D., p. 203. London, 1885.

² *Statutes of Quebec*, 48 Vict., Cap. 34.

recommendations made. By this law, Dr. A. Vallée, previously government visiting physician, became the first government medical superintendent of Beauport, with Drs. Belanger and Marois as assistants.

The resistance offered to reform by the proprietors of the two asylums was strenuous and persistent. The result was that in September, 1887, a Royal Commission was constituted to inquire into the difficulties which had arisen in consequence of the attempt to enforce the statute, and whether it exceeded the rights which the government held under its contracts with the proprietors.

The members of this commission were Messrs. J. A. Duchesneau, J. P. Lavoie, M. D. L., and W. Rhodes, who visited Beauport Asylum, October 20. Their report was far from creditable to the authorities of that institution. The bath-rooms and privies were badly kept, dirty and without ventilation; there were numerous cells, all back to back, lighted only from the corridors by small openings in the doors or above them; the food was deficient, both in quality and quantity; all the dishes, cups, etc., were of tin, and the patients were allowed only a spoon, many of them eating with their fingers; all the wards were overcrowded, and there was no attempt at classification; restraint was in excessive use, and in some cases patients bore the marks of blows they had received; in several of the male wards the patients were dirty, scantily clothed, and in a most pitiable state, their cells were also dirty, badly aired and without light; work was not used as a method of treatment, and many of the patients never got out at all; recreation was almost a thing unknown. The commission also found that the attendants were far too few in number, averaging in the male department only 1 to 23 or 24 patients; in the female, 1 to 12. In addition, this average was often greatly diminished, especially amongst the men, through the keepers, during the day, being employed outside the wards, which remained either without an attendant altogether, or with only one for two wards. For night service the attendance was still less. As a rule, the keepers could neither read nor write, and the wages paid were of the lowest, male attendants receiving only \$8 to \$10 per month in winter, and \$12 in summer; female, \$4.50 to \$5 per month. One physician had charge of the patients of both male and female departments, 884 in number, and had in addition to keep the registers and carry on the correspondence. He

had no control over the employees, who were engaged and dismissed by the warden. The means of mechanical restraint in use were mittens, muffs, wristlets, waist-belts, strait-jackets of leather and cotton, and crib-beds; its employment seemed to be left entirely to the discretion of the keepers.¹

The conclusions arrived at by the commission with regard to Beauport were that the institution was much behind those of other countries in many important details, and that the proprietors were not fulfilling the conditions of their contract with the government. On these grounds they recommended the cancellation of the contract, the acquirement of the asylum by the government, and the commitment of its internal administration to a religious community, said commitment to be safeguarded by confining the rôle of the religieuses exclusively to the domestic and administrative management. The commission also condemned, on general principles, the "farming-out" system, and enunciated the doctrine that the medical superintendent "should be the head of the establishment, be in authority and have under his own absolute direction the medical, moral and dietetic treatment of the patients."²

The recommendation of the commission as regarded the cancellation of the Beauport contract was not acted upon, but steps were taken to remedy some of the graver abuses. On its expiration, however, in April, 1893, the asylum and the contract passed by purchase from the hands of its former proprietors into those of the Sisters of Charity of Quebec, with whom the government made a fresh agreement for the maintenance of the public insane at \$100 annually per head.

Under the new contract the medical control was kept in the hands of the government, and Dr. Vallée became medical superintendent in the true sense of the word. Dr. Vallée soon proved himself well fitted to wield the increased powers intrusted to him. Under his directions the Sisters in 1893 in the women's building, and in 1894 in the men's, went to a large expense in making changes and improvements. The water-closet, heating and ventilating systems were completely modernized, and structural alterations made which greatly increased the comfort of the patients and the

¹ Report of Royal Commission on Lunatic Asylums of the Province of Quebec, 1888, p. 27.

² *Ibid.*, p. 166.

facilities for proper classification. The old cells in the male department, badly lighted and badly ventilated, gave place to rooms into which light and air came directly from the windows, and the whole establishment was soon placed on a much superior footing.¹ As an alienist Dr. Vallée held modern views with regard to the necessity for clinical instruction in mental diseases to students, the great benefits to be derived from the occupation and amusement of patients, and the manifold advantages of the total abolition of mechanical restraint. His views on the last-named point were thus plainly set forth in his annual report for 1894:

Whilst striving to introduce work amongst our patients, we have succeeded in causing the disappearance of all mechanical restraint. Under these circumstances this problem was not easy to solve, for it will be admitted that it is more difficult, in an already old institution, to break away from ancient traditions than to establish at the outset a new rule of conduct in a new organization. We met with some difficulties in the beginning, but they were soon smoothed over, thanks to the ingenious devotedness of the Sisters. To-day every one is so convinced of the superiority of this system over that of restraint that no one would think of returning to the latter. Where there is a case of extreme violence they always come to us for help and advice, but there is no longer any question of straps and strait-jackets, which have, moreover, completely disappeared from the wards. This system necessarily demands more attention on the part of the guardians and physicians, but, on the other hand, the general appearance of the different wards is so perceptibly improved that it is more than sufficient compensation.²

On February 4, 1896, Beauport was visited by yet another fire, this time in the center building of the male department. Happily, on this occasion there was no loss of life. The damage done was comparatively slight, and was soon made good.

Dr. Vallée having died on January 23, 1903, was succeeded by Dr. D. Brochu, a leading physician of Quebec. He still remains in office, his appointment dating from February 13, 1903. Sister Ste. Calixte is the superioress and in charge of all domestic arrangements, which are carried on by the Sisters, who also do the greater part of the nursing.

Since Dr. Brochu's assumption of office several important additions to and improvements in the establishment have been made.

¹ The work of replacing the cells in the female department by similar well-ventilated and well-lighted rooms was commenced in 1896.

² Report of the Quebec Lunatic Asylum for the year 1894, by the medical superintendent.

Thus, between 1904 and 1906 two pavilions were built to meet the ever-increasing demand for more room, while later an additional story was added to the west wing of the women's building to accommodate 100 patients. Other needed changes have been pointed out by the superintendent, but the Sisters, although agreeing with the need for them, justly plead that they are unable to meet all these demands at the present rate fixed by the government. This, which is \$120 per annum per capita, is decidedly too low considering the steadily increasing cost of the necessities of life, which is much in excess of what it was when their contract was made. Of the Sisters as nurses Dr. Brochu speaks in the highest terms. They make, in his opinion, ideal nurses, being enthusiastic in their work to the highest degree.

The asylum population at the close of the year 1913 was 1360, but the superintendent regarded this number as in excess of the accommodation.

ST. JOHN'S ASYLUM.

As already stated, the Board of Inspectors of Asylums and Prisons, constituted in 1859, had pointed out in the strongest possible terms the greatly overcrowded state of the Beauport Asylum and the urgent necessity for the creation of another institution. The government accordingly in 1861 responded to their recommendation by proposing to convert the old military barracks at Fort St. Johns, which had been given up by the Imperial authorities to the provincial government, into an asylum for the western half of Lower Canada. To this end Mr. J. C. Taché, one of the inspectors, and Dr. Workman, of Toronto Asylum, were commissioned to visit the buildings with a view to reporting what was necessary to be done in order to fit them for their new use. The visit was made and Dr. Henry Howard of Montreal, who had been appointed medical superintendent, on June 6 had almost completed the arrangements recommended, when the threatening prospect of a war with the United States, owing to the Trent affair, compelled the home government to resume the occupancy of Fort St. Johns for purposes of defence.

Under these circumstances Dr. Howard advised that an old building in St. Johns, formerly used as a court house, the property of the government, should be made to answer for a few months

as a temporary asylum for 50 patients, 25 of each sex. Being instructed to take immediate possession and fit it up as such, he at once set to work, and on August 27 was able to receive 11 patients sent to him. By the end of the year the admissions had amounted to 48.

The building thus occupied was an oblong, two-story brick structure, 60 feet long by 40 feet wide, which stood in rear of the new court house.¹ It constituted the only attempt at state care that has ever been made in the Province of Quebec.

The inspectors on their first visit to the institution, styled the Provincial Lunatic Asylum, while commending the arrangements made by Dr. Howard as the best possible under the circumstances, condemned the establishment as altogether unsuited for an asylum, and quite inadequate to the wants of the province. "The present arrangement," Dr. Wolfred Nelson reported, "is a mere make-shift, and another and far more extensive establishment should be provided with the least possible delay. There are still to be provided for hundreds of insane scattered through the Lower Province, some in jails, others in charitable institutions, and not a few with their families, who have neither the means nor the appliances for their proper treatment."²

That the arrangement was indeed of the most "make-shift" character is proved by the report of Inspector Ferres, who thus comments upon it:

The narrow passage below is the dining room for the males, two or three boards set upon trestles being the table, and the passage upstairs, equally narrow, is a day-room and dining room for the females. The rooms used as dormitories are filled with beds on both sides, separated about a foot from each other with a foot-path down the middle, not three feet wide. In the yard sheds have been, with a few boards, improvised into a kitchen, a store-room and a laundry. Classification, where there is not room for the patients to move about, so crowded are they together, is of course entirely out of the question, and it is only by constant attention that the extreme cleanliness which prevails can be effected. It must, perhaps, be called an asylum, because insane people find a refuge in it, but in no other respect is the name applicable.³

¹The old court house was torn down some years ago and the site converted into the public square or garden immediately in front of the Canadian Pacific Railway station.

²Report of Board of Inspectors of Asylums, Prisons, etc., for the year 1861, p. 37.

³*Ibid.*, p. 68.

Dr. Howard labored under great disadvantages, and one of the most serious difficulties he had to encounter was to provide for the proper washing of his patients with dirty habits. How this was overcome is best described in his own words:

I had only one temporary bath erected in an out-house, and which could not be used in cold weather; but even had I two or three of these baths to wash these patients as often as it was necessary it would have been an endless task. In fact, I cannot conceive how it is possible by the slow process of baths to maintain cleanliness among the inmates of a lunatic asylum. Under this impression, I have lately effected a temporary arrangement which I have found most valuable. This is a cell which, under ordinary circumstances, will answer for the confinement of an unruly patient for a couple of hours; but for the purpose for which I erected it was a washing place. It is three feet square, the floor an inclined plane, terminating in a sewer which connects with a wash-pipe. In the cell the patient is placed naked; or if his clothes are very dirty he is allowed to keep them on; to wash him I then use the hose of a small fire engine, by means of which he is thoroughly cleaned, and immediately after taken out and rubbed by means of a coarse towel. The water used is tepid. Not only has a great saving in time and labor been effected by this means, but I really believe that it has had the moral consequence of making the patient clean in his habits; whilst the friction on the skin with the coarse rubbers has had a most excellent effect, as every one who has been accustomed to the care of lunatics knows the peculiar and offensive exudation from the skin, and how beneficial constant washing must be. Besides which, a first ablution of this character completely removes the vermin with which many, particularly such as have been confined in jails, are literally covered.¹

Dr. Howard in his first report also speaks strongly in favor of exercise, employment, amusement, good nourishment, and kindness as the factors in treatment, but naively adds:

It must not be presumed that punishment is never resorted to for the control of the unruly and disobedient. But when deemed advisable and necessary, this consists of a few hours' confinement in a cell, or a deprivation of one meal, or both combined. It is surprising how the lunatic, even, is subdued by confinement and a hungry stomach.²

A year later, and the inspectors again registered a complaint against the continued occupancy of this building, saying:

This institution is still continued in the old building formerly used as a court house, which is only 60 x 40 outside—one story being 10 feet high,

¹ Report of Board of Inspectors of Asylums, Prisons, etc., for the year 1861, p. 127.

² *Ibid.*, p. 129.

and the other gained from the roof, only 9 feet. The dormitories, with an office of most contracted dimensions, a storeroom and lavatory, occupy the whole building; the lower floor is appropriated to males, and the upper to females. There is no day-room nor dining-hall, but the former passage of the court house is made to do duty for both. Into this space 28 males and 29 females, 57 in all, with the necessary attendants, are packed; and it is with unfeigned satisfaction that the inspectors have it in their power to state that by the unremitting vigilance of Dr. Howard, the medical superintendent, and the active attention of the officers and servants, the general health of the inmates has been preserved in a good state during last year. It is impossible to convey by words an adequate idea of the miserable condition of this asylum.

Here, as at the other asylums, the want of farming land is most severely felt. The patients have no more enjoyment or freedom out of doors than if they were convicts in a jail. They have access to the yard in rear of the old court house, and so get into the open air, but without any opportunity for such exercise as they require. Cooped up within naked board fences 12 or 14 feet high, they see nothing, and have nothing to soothe or cheer them; there is no variety to turn the currents of their moody reflections; no change to give a new color to their delusions.¹

In the same report they gave a harrowing picture of the deplorable conditions due to the want of proper accommodation for the lunatics of the province, by stating:

The gaol at Montreal, which already can hardly suffice for the reception of the prisoners of the city alone, has been converted into a receptacle for the insane, one of the prison wards being given up, as a matter of absolute necessity, for their accommodation. At the end of the year 1862 there were in the gaol at Montreal 21 insane persons awaiting their turn to be admitted either into the Beauport Asylum or into that at St. Johns; 10 of these insane men were together in the ward just mentioned and the other 11 (women) were allowed to mix with the other female prisoners in the gaol, to the great detriment of all.²

Year after year the inspectors and superintendent protested against the continued occupation of this building, but year after year it remained in use. The overcrowding, at the same time, instead of being lessened, increased. To such an extent was this carried that by the close of 1864, into a space far too contracted for 50 patients, as originally intended, there were actually packed 64 human beings. The horrible condition of affairs resulting was strikingly pointed out by one of the board, Dr. F. Z. Tassé, in 1866.

¹ Report of Board of Inspectors of Asylums, Prisons, etc., for 1862, p. 13.

² *Ibid.*, p. 18.

By actual measurement he showed that there was but 221 cubic feet of air-space for each patient, whereas the best writers on hygiene recommended that not less than 800 to 1000 cubic feet, or even more, should be allowed. Continuing, he stated:

To this evil (overcrowding) is added the utter impossibility of providing them with employment, the recreation of walking, the sight of the country, and that variety of occupation which is the basis of all remedial agents, and which ought to be procured for them at any cost.¹

At length, the spirit of economy provoked the action which common humanity should have dictated long before. The year 1875 saw the closing of the first, and, so far, the only purely government institution for the care of the insane in the Province of Quebec. State care, in this respect at least, has from that time been a thing unknown. At St. Johns, as is certain to be the case in all small establishments, the cost of maintenance had always been much higher than at Beauport, or in any of the Ontario institutions, amounting annually to considerably over \$200 per head. On this account the government in 1873 accepted an offer made by the Sisters of Charity to receive the idiots, then supported at the public expense, into their hospital at Longue Pointe, and to maintain them at the rate of \$100 each per annum. This led to the removal in that year of 34 of this class who were among the inmates at St. Johns Asylum. In 1875, when a like contract was made with the Sisters to receive the insane, the remaining patients were transferred therefrom, and the institution was finally closed July 20, 1875. The medical superintendent, Dr. Howard, accompanied the patients, receiving the appointment of government visiting physician to St. Jean de Dieu Asylum, and assumed duty as such August 1, 1875.

LONGUE POINTE ASYLUM.

L'Hospice St. Jean de Dieu, or, as it is commonly called, "Longue Pointe Asylum," from its being situated near the village of that name, is the property of Les Soeurs de Charité de la Providence. It owes its origin to a wealthy retired merchant, one Jean Baptiste Gamelin, who, in 1823, had married a Miss Emelie

¹Report of Board of Inspectors of Asylums, Prisons, etc., for 1866, p. 47.

Tavernier. The three children born of this union dying in infancy, the worthy couple adopted an idiot child. Monsieur Gamelin, at the time of his death, which occurred in Montreal, October 1, 1827, confided this child to the special care of his wife, in these terms: "Continue de prendre soin de cet infortuné, en souvenir de moi et pour mon amour."¹ This request was piously fulfilled by Madame Gamelin, who, in addition, consecrated her life, as well as the fortune that had been left her, to the relief of the poor and afflicted, and became the foundress of the community known as the Sisters of Providence.

From the beginning, in memory of her husband, Madame Gamelin proposed that the care of the idiotic and the insane should be one of the charitable works of the order. Consequently, in November, 1845, a little wooden house, from the color of its exterior called among the Sisters "The Yellow House (Maison Jaune)," was appropriated as the habitation of a few lunatics. It was situated in the garden of the first establishment of the Sisters, at the corner of St. Catherine and St. Hubert streets in Montreal, and was placed in charge of Sister Assumption, née Brady, who is reputed to have had special tact in soothing her patients by singing hymns to them.²

The number that could be cared for in this modest retreat, the pioneer institution for the insane in the district of Montreal, was necessarily very small. In 1850 the Rev. Mère Gamelin, with Sister Ignace and Abbé Truteau, visited several asylums in the United States, their object being to examine into the management of these establishments with a view to the extension of their own sphere of usefulness. They returned fully resolved to pursue their good work on a larger scale.

The community at this time had a farm near the village of Longue Pointe, about five miles from Montreal, known as the "Mission St. Isidore." This had been given to the Sisters by the parish of Longue Pointe under certain conditions, one of which

¹ Notice Biographique de la Révérende Mère Gamelin, Fondatrice et Première Supérieure de l'Institut des Soeurs de Charité de la Providence, Montréal, 1875, p. 9.

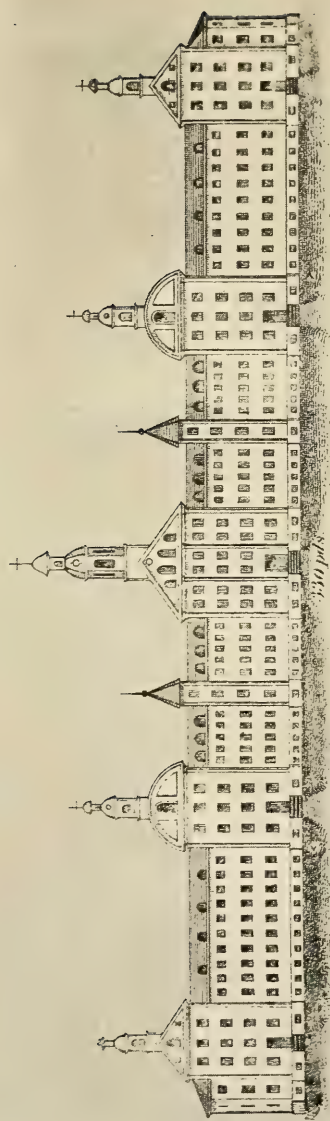
² Histoire de l'Hospice St. Jean de Dieu à la Longue Pointe, par. A. Bellay, Montréal, 1892, p. 7.

was that they should establish thereon a school for female children.¹ In 1852 the parish still further assisted the order by helping it to acquire an additional property situated in the village on the banks of the St. Lawrence. To the buildings on this ground was given the name "Convent St. Isidore," and thither the Sisters removed their school. At the same time, in order to carry out the wishes of the lamented foundress of the order, as well as to meet the urgent requests made to them from all sides, they fitted up the buildings thus vacated on the St. Isidore farm as an asylum for lunatics. To this institution they removed the patients from the "Maison Jaune," placing them in charge of Sister Praxede, afterwards one of the foundresses of the Oregon mission of the order. In October, 1852, the new establishment thus instituted was consecrated by Monseigneur Bourget, who placed it under the protection of St. Jean de Dieu. This was done in commemoration of a saint, who, confined as a madman by people incapable of comprehending the sublimity of his charity, had rewarded his persecutors by founding, at Madrid two hospitals for the insane and the poor.

Ignorant of the care of lunatics, and without any of the advantages for treatment to be found in modern asylums, the Sisters labored under great difficulties in their pious undertaking. Up to 1856 the number of the insane under their charge at one time was never more than 17 to 20. In that year, on the advice of Sister Zotique, then superior of the mission and one of the foundresses of the order, the community decided to transfer the patients from the farm to the Convent St. Isidore. The transfer was made October 30, 1856.

The new lodging of the lunatics was a two-story building, partly stone, partly wood, 96 feet long, facing the St. Lawrence, from which it was separated by a row of large trees. A corridor in the center divided the building into two wings. In the south one were placed the patients, each of whom had a single room. The north wing was otherwise occupied.

¹In 1851 this farm became the cradle of an institution well known in the province of Quebec, the school for deaf-mutes: It was here, at Longue Pointe, that Sister Marie de Bonsecours, of saintly memory, began to teach her first pupils. For seven years she labored in the little school of the parish, and paved the way for the extensive establishment for deaf mutes that now exists in the City of Montreal.



Longue Pointe Asylum, 1875.

630 pds. de façade

ARCHITECT'S DESIGN OF LONGUE POINTE ASYLUM, OPENED 1875.

In 1863 the Sisters erected an additional structure in the courtyard of the convent, on the edge of the village street. It was connected with the main building by a covered passageway and devoted exclusively to the insane. In constructing it the old buildings on St. Isidore farm were pulled down, and the materials used in the new edifice. With this demolition disappeared the original St. Jean de Dieu Asylum, and there now remain to mark the spot where it stood only some clumps of trees and bushes, which indicate the situation of the old garden cultivated by the Sisters. The convent buildings, including those used for the insane, are still in existence, and in almost the identical condition in which they were at the period of which we speak.

Notwithstanding the additions made, it was yet difficult to receive more than 20 to 25 patients in the convent buildings, so that it became a matter of great concern to the Sisters how they should meet the ever-increasing demands made on their charity.

The parish of St. François d'Assises de la Longue Pointe, which is the full title of this noteworthy locality, had for priest at this time M. Jean Baptiste Drapeau. He was a man of sound judgment, and one who took a deep interest in all the charitable works of the community, but especially in those relating to the care of the insane. To him occurred the idea of a hospital for these poor creatures on a larger scale—one combining all the conditions demanded by modern science for their proper treatment. With the object of carrying out his idea, he advised the acquisition of a large demesne situated near the convent, which he thought would make an admirable site for the institution of which he dreamed. It belonged to a well-known family named Vinet, and comprised about 166 arpents of land. The resources of the Sisters, however, were but limited, and it was not until 1868 that they were able to accomplish this, the first instalment of the purchase money having been contributed by Mlle. Symes, afterwards Marquise de Bassano. The land thus acquired was not made use of until a few years later, when, with the sanction of the Legislature, the order entered upon the work of caring for the insane on a greatly enlarged scale.

The fact that Beauport Asylum was much overcrowded, and that the temporary institution created at St. Johns was not only in like condition but badly adapted to asylum purposes, had been strongly urged upon the government. In consequence, the then

Premier of the province, the Hon. Gédéon Ouimet, authorized by an Order in Council, dated September 27, 1873, entered into an agreement with the Sisters of Providence, represented by Sister Thérèse de Jesus, treasurer of the community, whereby the latter engaged for a term of five years to receive and care for idiots of both sexes. The contract was signed October 4, and by November 7 the government had sent to the Sisters at Longue Pointe 34 patients from the asylum at St. Johns, 38 from Beauport Asylum and 5 from outside, making a total of 77.

St. Isidore Convent was quite inadequate for the accommodation of this number of patients, and the Sisters accordingly had to find room elsewhere, pending the erection of a new asylum which they had now decided to construct on the Vinet property. The additional room was gained by the rental of the "Hochelaga" or "Hussar Barracks," then empty. These were stone buildings which had formerly been occupied by the troops stationed in Montreal. They stood near the foot of St. Mary Street, and comprised the old military hospital, the officers' quarters and the military prison.¹ Their new home was taken possession of by the Sisters on November 7, 1873, and on November 30 they celebrated their first mass therein, an altar having been erected in one of the hallways. They were devoted entirely to male patients, the convent buildings being reserved for females. The medical attendance at both establishments was rendered by Dr. F. X. Perreault, who began his duties October 13.

As 112 was the greatest number of patients that could be provided for in the Hochelaga buildings, it soon became evident that the erection of the new asylum must be hastened as much as possible. The first question to be decided was, what plan of building should be adopted. To settle this, Sister Thérèse, with Sister Godefroy, the superior-general of the order, and Mr. B. Lamontagne, their chosen architect, visited a number of asylums in Ontario and the United States, finally selecting that of Mount Hope, Baltimore, Md., as the general model on which to construct their new establishment.

¹ A part of these buildings has been torn down, but a remnant is still standing not far from Notre Dame Street, and is used as a coal-shed by the Canadian Pacific Railway.

Work was begun in April, 1874, and such was the vigor with which Sister Thérèse pressed it on, that by July 20, 1875, they were able to begin the transfer of the patients from the old barracks. Their evacuation was completed by August 14, and shortly after the Convent St. Isidore was also emptied of its inmates.

The new St. Jean de Dieu Asylum consisted of a main building, 169 feet long by 60 feet wide, connected by wings 90 feet long by 40 feet wide, to two other buildings, each 125 feet long by 45 feet wide. The connecting wings were five stories high, including the basement and attic; the three other buildings, six stories in height, including basement and attic. All the buildings were of brick, with cut stone trimmings and foundations.

In July, 1875, the Sisters entered into a new contract with the government, represented by Premier de Boucherville, by which, for the space of 20 years, they agreed to receive and care for all insane, as well as idiotic patients, at the rate of \$100 a year for each patient sent them. The government on its part covenanted that the number of patients placed in charge of the Sisters should not be less than 300, including those already under their care. As a result of this agreement the temporary asylum at St. Johns was closed, and the inmates transferred to the custody of the Sisters, with Dr. Howard, formerly superintendent of the St. Johns institution, as government visiting physician.

Under the new arrangement, so rapid was the increase in population that, at the close of the year 1875, it had reached 408. This rate of growth continued, and in 1884 and 1885 it became imperative to extend the already large establishment by the addition of two other wings, similar to those already in existence, making the total frontage of the structure 630 feet.

About 1880, as already referred to in speaking of Beauport Asylum, difficulties between the government and the Sisters began to spring up. At one time Dr. Howard, the government physician, represented to Sister Thérèse that in his opinion several of the patients had recovered, and recommended their discharge. This recommendation was met by refusal. Appeal was then made to the Provincial Secretary, who supported Dr. Howard. The discharge of the patients was, however, still refused, and only by the exercise of the civil authority was obedience enforced. Immediately following this came the publication of Dr. Tuke's report on the

asylums of Canada, in which those of Quebec were shown to contrast most unfavorably with those of the sister province of Ontario. Severe as had been Dr. Tuke's arraignment of Beauport, it was infinitely mild in comparison with his merciless criticism of the Longue Pointe institution. While thanking Sister Thérèse and others of the community for their kindness throughout his visit, and doing full justice to the comfort and cleanliness of some parts of the asylum, he gives the following heartrending description of the attic and basement stories:

It is impossible to convey an adequate idea of the condition of the patients confined in the gallery in the roof and in the basement of this asylum.

They constitute the refractory class—acute and chronic maniacs. They and the accommodation which has hitherto been provided for them must be seen to be fully realized. To anyone accustomed to a well-ordered institution for the insane, the spectacle is one of the most painful character. In the course of seven-and-thirty years I have visited a large number of asylums in Europe, but I have rarely, if ever, seen anything more depressing than the condition of the patients in those portions of the asylum at Longue Pointe to which I now refer. I saw in the highest story, that in the roof, a gloomy corridor, in which at least 40 refractory men were crowded together; some were walking about, but most were sitting on benches against the wall or in restraint-chairs fixed to the floor, the occupants being secured to them by straps. Of those seated on the benches or pacing the gallery, a considerable number were restrained by handcuffs attached to a belt, some of the cuffs being the ordinary iron ones used for prisoners, the others being leather. Restraint, I should say in passing, was not confined to the so-called refractory wards; for instance, in a lower and quieter ward, a man was tightly secured by a strait-waistcoat. Dr. Howard had him released, and he did not evince any indication of violence. It was said he would tear his clothes—a serious matter in an asylum conducted on the contract system. The walls and floor of the corridor in the roof were absolutely bare. But if the condition of the corridor and the patients presented a melancholy sight, what can be said of the adjoining cells in which they sleep and are secluded by day? These are situated between the corridor and a narrow passage lighted by windows in the roof. Over each door is an opening the same width as the top of the door, and three to four inches in height, which can be closed or not as the attendant wishes. This aperture is, when open, *the only means* of lighting the cell. The door is secured by a bolt above and below, and by a padlock in the middle. In the door itself is a *guichet* or wicket, secured, when closed, by a button. When opened, a patient is just able to protrude the head. There is, as I have intimated, no window in the room, so that when the aperture over the door is closed it is absolutely dark. For ventilation, there is an opening in the wall opposite the door, which communicates above with the cupola; but what-

ever the communication may be with the outer air, the ventilation must be very imperfect. Indeed, I understood that the ventilation only comes into operation when the heating apparatus is in action. What the condition of these cells must be in hot weather, and after being occupied all night, and in some instances, day and night, may be easily conceived. When the bolts of the door of the first cell which I saw opened were drawn back and the padlock removed, a man was seen crouching on a straw mattress rolled up in the corner of the room, a loose cloth at his feet, and he stark naked, rigorously restrained by handcuffs and belt. On being spoken to he rose up, dazzled with the light; he looked pale and thin. The reason assigned for his seclusion and his manacles was the usual one, namely, "he would tear his clothes if free." The door being closed upon this unfortunate man, we heard sounds proceeding from neighboring cells, and saw some of their occupants. One, who was deaf and dumb, as well as insane, and who is designated *l'homme inconnu*, was similarly manacled. In his cell there was nothing whatever for him to lie or sit upon but the bare floor. He was clothed. Some of the cells in this gallery were supplied with bedsteads, there being just room to stand between the wall and the bed. When there is no bedstead a loose palliasse is laid on the floor, which may be quite proper. In reply to my enquiry, the Lady Superior informed me that it was frequently necessary to strap patients down in their beds at night.

Passing from this gallery, which I can only regard as a "chamber of horrors," we proceeded to the corresponding portion of the building on the female side. This was to me even more painful, for when, after seeing the women who were crowded together in the gallery, on benches and in fixed chairs, many also being restrained by various mechanical appliances, we went into the narrow passage between the pens and the outer wall, the frantic yells of the patients and the banging against the doors constituted a veritable pandemonium. The effect was heightened when the *guichets* in the doors were unbuttoned, and the heads of the inmates were protruded in a row, like so many beasts, as far as they could reach. Into this human menagerie, what ray of hope can ever enter? In one of the wards of the asylum I observed on the walls a card, on which were inscribed words to the effect that in Divine Providence alone were men to place their hopes. The words seemed to me like a cruel irony. I should, indeed, regard the Angel of Death as the most merciful visitant these wretched beings could possibly welcome. The bolts and padlocks were removed in a few instances, and some of the women were seen to be confined by leathern muffs, solitary confinement not being sufficient. When such a condition of things as that now described is witnessed, one cannot help appreciating, more than one has ever done before, the blessed reform in the treatment of the insane which was commenced in England and France in 1792, and the subsequent labors of Hill, Charlesworth, and Conolly. But it is amazing to reflect that although the superiority of the humane mode of treating the insane, inaugurated nearly a century ago, has been again and again demonstrated, and has been widely adopted

throughout the civilized world, a colony of England, so remarkable for its progress and intelligence as Canada, can present such a spectacle as that I have so inadequately described as existing, in the year of grace 1884, in the Montreal Asylum.

Before leaving the asylum I visited the basement, and found some 70 men and as many women in dark, low rooms. Their condition was very similar to that already described as existing in the topmost ward. A good many were restrained in one way or another, for what reason it was difficult to understand. Many were weak-minded, as well as supposed to be excitable. The patients sat on benches by the wall, the rooms being bare and dismal. A large number of beds were crowded together in a part of the basement contiguous to the room in which the patients were congregated, while there were single cells or pens in which patients were secluded, to whom I spoke through the door. The herding together of these patients is pitiful to behold, and the condition of this nether region must in the night be bad in the extreme. I need not describe the separate rooms, as they are similar to those in the roof. The amount of restraint and seclusion resorted to is, of course, large. Yet I was informed that it was very much less than formerly.¹

The result of this exposure, and the strenuous protests of the Montreal Medico-Chirurgical Society against the continuance of such a state of affairs, was the passage by the government of the act of 1885, and the appointment of Dr. Howard as first medical superintendent, with greatly increased powers. Dr. Perreault, who, from October 13, 1873, had been in the employ of the Sisters, was at the same time made assistant to Dr. Howard, and as such severed his connection with the Community. Associated with Dr. Perreault was Dr. E. E. Duquet.

The passage of this act served still further to embitter Sister Thérèse, who at once appointed another medical staff of her own, consisting of Drs. Durocher and Prieur. Later, this staff was increased by the addition of Dr. Bourque, while Dr. Durocher was replaced by Dr. Chagnon.

The constant efforts made to hamper the government officials in the discharge of their duties resulted in the constitution of the Royal Commission of 1887. The report of this body with regard to Longue Pointe Asylum, while giving full credit to the cleanliness of the institution, and the good food and clothing supplied the patients, showed clearly there were many points connected

¹ The Insane in the United States and Canada, by D. Hack Tuke, M. D., London, 1885, p. 193.

with the management that required radical reorganization. There was no system of classification, the asylum was overcrowded, and the attendants were too few ; there was no scientific organization to utilize employment as a means of cure, and many of the patients never got outside the building from year's end to year's end ; restraint, though largely given up since Dr. Tuke's visit, was still much too frequent, and was not under control of the physicians, nor was there any register kept of it. But the most blameworthy state of affairs set forth was, that while under the law of 1885 the government medical officers were constituted a part of the administrative staff of the asylum, the Sisters refused to receive them as aught but visiting physicians, and formally declined to allow them to carry out the duties imposed upon them by that law, under the plea that it was a breach of their contract. They went even further and denied them the privileges they had exercised as visiting physicians prior to 1885, refused to give them any information, and forbade the keepers to answer any questions they might put to them. The government medical officers had absolutely no authority beyond the supervision of the admissions and discharges—were not even allowed to have keys by which they could enter the wards alone, but always on their visits had to be accompanied by some of the Sisters.¹

On the most eminent legal advice, the commission, in spite of the evil state of affairs which they recognized as prevailing, could report only that the act of 1885 did conflict with the rights of the Sisters as defined by their contract with the government. In consequence, they could but suggest the abandonment of the government's claims until the expiration of the contract, when the act as a whole might be made a part of any new agreement.

Dr. Howard, having died October 12, 1887, was succeeded by Dr. E. E. Duquet, whose appointment was dated December 24 of that year.

Like his predecessor, Dr. Duquet found all his efforts to improve the management of the institution hampered by the terms of the existing contract. He could, therefore, only resign himself to await patiently its expiration ere attempting to enforce the reforms in treatment which he clearly saw were so much needed.

¹ Report of Royal Commission on Lunatic Asylums of the Province of Quebec, 1888, p. 39.

On May 6, 1890, the Longue Pointe establishment was the scene of one of the saddest calamities recorded in asylum history. About noon of that day a fire broke out on the third story, in one of the rooms used for the storage of linen. In less than five hours the whole immense structure, the shelter of over 1300 unfortunate lunatics, was swept completely out of existence. No fewer than 75 patients and 5 Sisters perished in the flames.¹

The terrible catastrophe served to arouse Sister Thérèse from a sick bed to, if possible, more than her wonted vigor. In a few days the female patients were billeted on the different charitable institutions belonging to the Sisters at Longue Pointe and in Montreal, while the men were temporarily housed in the exhibition buildings belonging to the latter place. The erection of a temporary establishment was at once commenced, the system of semi-detached pavilions being adopted. The pavilions were 14 in number, 7 being placed on each side of the main avenue leading to the ruins of the old asylum. They were two stories in height and built of wood. The units composing each group of seven were connected together by a central covered corridor, 10 feet wide by 600 feet long, through which ran a tramway for the conveyance of food to the different sections. The pavilions were 200 feet in length by 40 in breadth, and each was divided, as it were, into two houses by the central corridor. By the 17th of August, little more than three months after the destruction of the asylum, these structures were sufficiently advanced to receive the female patients scattered amongst the various charitable institutions. On September 8 the men were transferred from the exhibition buildings.

November 22, 1891, the community suffered another great loss in the death of Sister Thérèse, who, though far from faultless, had proved herself a tower of strength to the order. She was succeeded by Sister Madeleine du Sacré Cœur, whom she had long designated as the one on whom her mantle should fall.

In December, 1894, Dr. Duquet, the medical superintendent, was taken ill with pneumonia, and, worn out with the many difficulties he had been forced to encounter, was unable to withstand the attack which ended his useful life on the 19th of that month. He was succeeded by his assistant, Dr. George Villeneuve, as acting superintendent, which appointment was made permanent

¹ The most searching enquiry failed to reveal the origin of this holocaust.



GENERAL VIEW OF THE RUINS OF LONGUE POINTE ASYLUM THE DAY AFTER THE FIRE.

April 4, 1896. Under his able administration many important advances have been made.

In the same year (1894) a new stone building, three stories high and 150 feet long, with accommodation for 300 patients, was built in the midst of the ruins of the old structure, and, with the temporary pavilions, formed the St. Jean de Dieu Asylum. This building (Sainte Thérèse) now forms the department for private patients.

The contract of 1875, the cause of so much ill-feeling, having expired, a new one was made on March 13, 1897, between the government and the Sisters. In it were incorporated all the provisions of the act of 1885 which had conflicted with the rights of the Sisters as defined in the old agreement. The government physicians were thus given the supervision of the medical and moral treatment of the patients, as well as of their admission and discharge.

Under these new conditions, the state of affairs at St. Jean de Dieu Asylum was much bettered. Restraint was still used, but to a very limited degree, and occupation and amusement were recognized as valuable factors in treatment.

To this contract, which was for a period of 25 years at the rate of \$100 per head per annum, was appended a condition that the Sisters should undertake to replace the wooden pavilions by a hospital proper to be built on plans approved by the government.

The Sisters had not the necessary means for fulfilling this obligation at their disposal, and, accordingly, borrowed a million dollars on the government's guarantee.

Both for the purpose of contributing towards the gradual reduction of the amount of interest payable on the said loan and of enabling them to commence extinguishing a portion of the capital of their debt by means of a sinking fund the government granted:

(a) An additional sum of \$14 per annum for each patient provided for in the contract in the schedule of the act, for eight years from the first of July 1898.

(b) A sum of \$12 per annum for each of such patients during the eight years following the eight years above mentioned.

(c) A sum of \$10 per annum for each of such patients for the whole of the unexpired term of their contract of 25 years, counting from the end of the sixteen years above mentioned.

In accordance with their agreement, the nuns, in 1897, began the erection of an entirely new establishment, located on rising ground about a mile in rear of the site of the old asylum, and occupying nearly the center of a farm of 800 acres. In construction the pavilion plan was adopted, the building, as a whole, forming three sides of a rectangle. Stone was the material employed, the entire structure being made as nearly fireproof as possible. The heating, ventilating and equipment were of the most modern, the opinion of well-known experts having been taken upon all points. The estimated cost was \$1,000,000, and the proposed capacity 2000. L'Hôpital St. Jean de Dieu was the name decided upon for the new edifice.

The hospital, which took over five years to build and cost considerably over a million dollars, was first occupied in 1901.

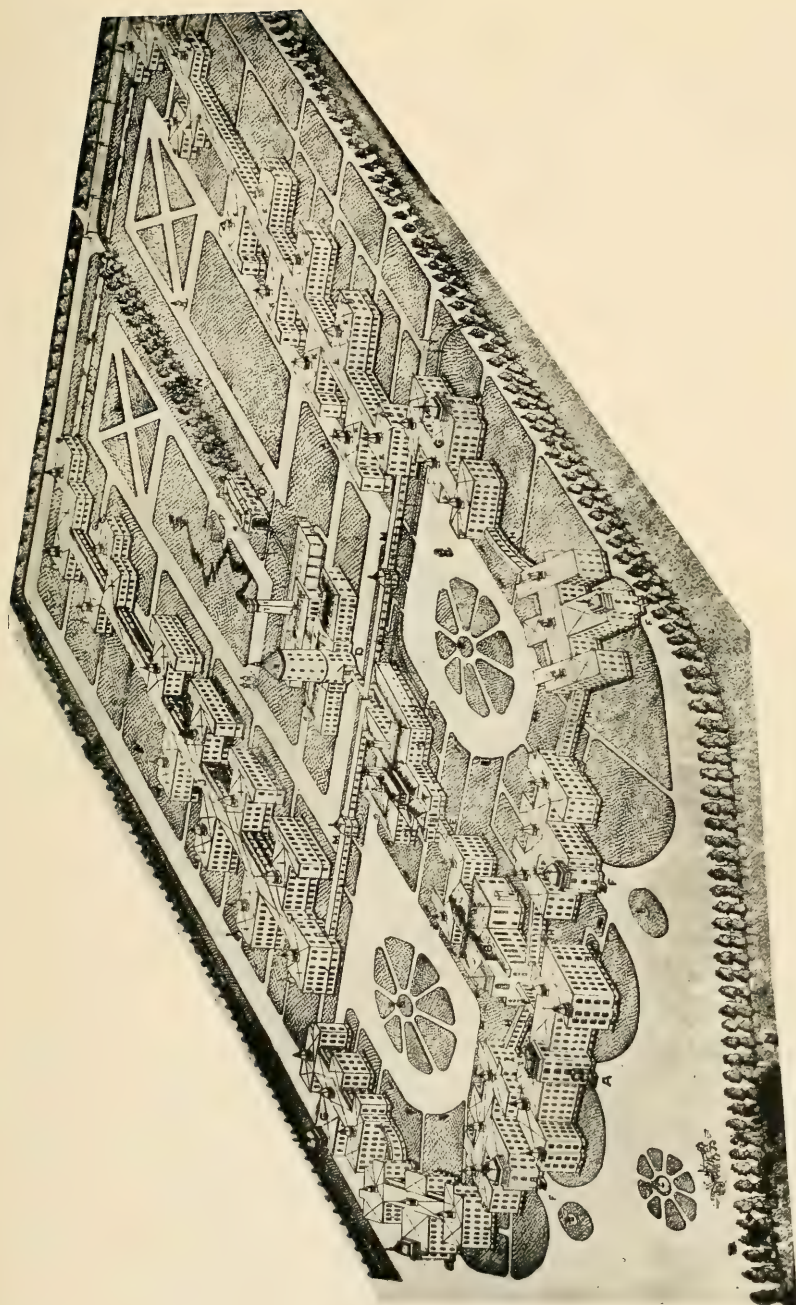
Since the erection of the building, the most important improvement has been the installation of an apparatus for filtering all the water used in the institution.

The St. Lawrence water, which supplied the hospital, had become greatly contaminated, and, after consulting experts, the Sisters decided to put in a filtration plant of the most modern type. As a result, typhoid fever completely disappeared, and gastrointestinal diseases were reduced to a minimum.

By this system two Worthington pumps, of a capacity of 250 gallons per minute each, force the river water into a coagulation tank, from which two other pumps, each of a capacity of 200 gallons per minute, drive the water through a six-inch pipe, 6000 feet long, into a concrete reservoir. A Gould pump, of a capacity of 1300 gallons per hour, situated near the hospital, carries the water from the reservoir into a water-tower capable of containing 100,000 gallons.

In 1911 operating rooms were opened. These were provided with modern aseptic apparatus, operating tables, sterilizers, etc., and all necessary operations are performed therein. In addition a clinical laboratory was instituted, in which the examination of the various secretions could be made and recorded.

In October, 1912, a nursing school was founded. This has been regularly attended by the nuns, 35 of whom successfully passed the examinations in all subjects in July, 1915.



LONGUE POINTE ASYLUM, ST. JEAN DE DIEU HOSPITAL, MONTREAL, QUEBEC.

During this same year, the Sisters finding the call upon their resources in excess of their revenue, made an appeal to the Legislature, which agreed to increase the amount paid for maintenance from \$112 to \$120 per annum. This sum, however, is still much below what the Sisterhood is justly entitled to, considering the greatly increased cost of living in recent years, and leads the nuns to defer improvements recommended by the superintendent, the necessity of which they admit, until they are in a better financial position.

Notwithstanding the paucity of funds, in 1914 the community added to the women's division a pavilion especially intended for restless patients, for whom the rest treatment in bed, chiefly recommended by Magnan in France, is used. A similar pavilion was provided for the men's division in 1915.

The institution, Dr. Villeneuve states, is overcrowded, the population at the close of 1915 being no less than 2475. Restraint, he says, is used only in surgical cases, and, very occasionally, when it is absolutely necessary to save a patient from grievous bodily harm.

To supervise and treat this large establishment, of which Rev. Sister Amarine is the present head, there are two staffs of physicians, one appointed and paid by the government, the other by the Sisters. The former, in addition to the medical superintendent, Dr. George Villeneuve, professor of psychology and neurology at Laval University, comprises Dr. F. E. Devlin, assistant superintendent, and Drs. T. B. de Grosbois, C. Laviolette, O. Noël and A. Allaire; the latter consists of Drs. A. Tetreault and G. L. DeBellefeuille, associate professors of psychiatry at Laval University, and Dr. J. C. Larose, demonstrator of psychology at the same institution.

There is also a consulting staff made up of Dr. G. Wilfred Derome, professor of medical jurisprudence at Laval University and pathologist to the Notre Dame Hospital; Dr. G. Archambault, associate professor of dermatology at Laval University and dermatologist to the Notre Dame Hospital; Dr. J. E. Panneton, professor of radiology and electricity at Laval University and radiologist to the Notre Dame Hospital; Dr. E. Dufresne, assistant professor of surgery at Laval University and surgeon to the Notre Dame Hospital; Dr. A. Prevost, assistant professor of neurology

at Laval University and neurologist to the Notre Dame Hospital; and Dr. E. Foucher, assistant professor of ophthalmology and laryngology at Laval University.

The other two proprietary asylums in the Province of Quebec are institutions devoted to the care of idiots.

ST. JULIEN ASYLUM.

L'Hospice St. Julien, located at St. Ferdinand d'Halifax, in Megantic County, is picturesquely situated on the shore of Lake William, about 15 miles from St. Calixte de Somerset station on the Grand Trunk Railway. It belongs to the Sisters of Charity of Quebec, who are also its directors, and was originally founded in September, 1872, as a refuge for old women. In 1873 arrangements were made for the reception of female idiots as well. The establishment now comprises a hospital for the reception of aged and infirm women as well as those suffering from incidental maladies, and an idiot asylum. The latter is a one-storied wooden building with mansard roof, 150 feet long by 45 feet wide, divided into four wards.

The first contract entered into by the government and the management of this asylum was in June, 1873, and extended over a period of ten years, the annual rate of maintenance being fixed at \$80 per head. In 1893, by a fresh contract made for ten years, the rate was increased to \$100. Rev. Sister Ste. Julienne is the superioress of the institution, and Dr. A. Noël government physician, having been appointed such in 1888. Prior to that date he held the position of visiting physician. The present capacity of St. Julien Asylum is about 100, and the population about 110.

Doubtless considerable change has been made in the institution, it having in all likelihood advanced *pari passu* with the other Quebec asylums, which have made much progress during the past eighteen years. As to the existing condition of affairs, however, nothing can be said, as it has been impossible to gain any information from the superioress or physician, to both of whom application was made. The foregoing account is taken from a sketch written by Dr. T. J. W. Burgess, and embodied in a paper presented by him, as his presidential address, to the Royal Society of Canada, 1898.¹

¹ Trans. Roy. Soc. Canada, Second Series, Vol. IV, 1898.

The inspectors of asylums in their report for 1913 speak of the institution in high terms of praise, and give Sister St. Josephat as the superioress and L. O. Noël, M. D., as the physician in charge. At the close of 1912 the population (idiots) was 161.

ST. ANNE'S HOSPITAL.

ST. PAUL'S BAY, QUE.

Necessity, the prolific mother of invention, has myriad children to her credit. In fact, on analysis, much of what is best in our present day social fabric can with little difficulty be traced to this alma mater, and it was largely owing to the great need therefor that the Hospice Ste. Anne, Baie St. Paul, was brought into being.

Some 30 miles east of the City of Quebec, on the banks of the St. Lawrence River, lies the village of Baie St. Paul, and 25 years ago the means of transportation with its natural urban center were primitive, and the journey fraught with much discomfort. In summer, steamers made but infrequent calls at its landing, and in winter an ill-kept road through the Laurentian Mountains afforded the only means of approach to Quebec, this necessitating a two days' trip for wayfarers to that city. Arduous as it was for the sound in body to make what seemed a veritable pilgrimage, the effort for those ailing in mind was felt by their relatives to be too great, and Beauport Asylum, owing to these obstacles, might well nigh have been in a foreign country. In fact, at this time not a few cases—albeit defectives and milder types of psychosis—seem to have been given what care their families could give them at home, while those less fortunate in having near kin roamed the highway, subsisting on the variable meed of public charity.

In 1889 there came to the parish to act as head of its affairs spiritual, the Rev. Ambroise Fafard, who saw in the ill plight of these unfortunates an ample opportunity to apply Christianity by works as well as by precept; happily a modest private legacy enabled him to purchase a large residence in the village, and there, under the direction and care of an elderly spinster, Mademoiselle Boivin, he assembled the senile peripatetics and idiots of his own parish as well as those of several bordering parishes. The idea was doubtless that of custodial care solely at first, and the up-keep of both manageress and her charges appears to have been secured

entirely from private sources, the folk of the countryside, under the stimulating example of the Reverend Father, contributing to their maintenance.

Lacking not in foresight and with the prophetic vision that faith inspires—seldom wrongly—Father Fafard sought to have the fruit of his labors incorporated, and in 1889 took steps to this end. The following year the institution received legislative sanction under the name of “Ste. Anne’s Hospital at Baie St. Paul,”¹ and a year later, owing chiefly to the interest of Mr. Jos. Morin, member of the Provincial Parliament, a contract was made with the Quebec Government by which its proprietors were to care for and treat 50 idiots.

Under the new conditions, the charity being now safely launched and giving promise of expansion, it was evident that something more elaborate as to administration would soon become peremptory, and singularly enough the nucleus of the governing body was even then in being, in Worcester, Mass. Here, 11 French Canadian nuns had formed together a sisterhood called “The Little Franciscan Sisters of Mary,” and were devoting their lives to the care of the aged, the infirm, and children in poor circumstances, having combined their resources to procure a small house where they gave asylum to these unfortunates. It was about this time that Rev. Father Fafard chanced to come in contact with their order while on a visit to Worcester, and at once he secured their attention and interest in the home which he had been instrumental in establishing in the country of their birth. The result was that they agreed to take over the direction of the institution at Baie St. Paul. They were doubtless the more ready to undertake the new work and repatriate themselves, as local difficulties had confronted them in Worcester, owing, it is regrettable to record, to their nationality, and perhaps also to their language, difficulties which bade fair to deprive them even of their property holdings had not their cause been ably and successfully championed by the Rev. Fafard. It is noteworthy that this small house has been to-day transformed into a fine hospital building, with a valuation of over \$100,000, in Worcester, still under the direction of the

¹ Statutes of Quebec, 53 Vict., 1890, Cap. XC. An act to incorporate the Reverend Ambroise Fafard, priest (and others), for charitable purposes, under the name of L’Hospice Sainte Anne de la Baie Saint Paul.



STE. ANNE DE LA BOIS, ST. PAUL ASYLUM.

order, and still engaged in the self-denying work, the seeds of which were sown some three decades ago.

The community in its new home was granted a charter, procuring incorporation in 1898,¹ the mother house of the order being established at Baie St. Paul, and its first superioress was the devoted Sister Mother Anne of Jesus. During the years from 1890 to 1907, under the Sisters' supervision, a new building was erected and a new contract with the government made, by which a minimum of 100 patients were to be cared for.² By the act³ of 1898 the corporation was permitted to give instruction, elementary and superior, to found various scholastic, industrial and corrective institutions, etc., and to open "refuges for aged or infirm persons of both sexes, hospitals for the sick, dispensaries, asylums for idiots and the insane of both sexes."

The location of the home could scarce have been better chosen; set in the fertile valley of Baie St. Paul, amid far-flung meadow country, the immediate outlook gives on the St. Lawrence River, while as far as the eye can reach, in the opposite direction, the gentle tree-clad slopes of the Laurentian Mountains bring to the vista their tribute of beauty—the peaceful security of the "eternal hills."

The general arrangement of the buildings forming the institution is that the monastery proper holds a central position, while three other structures, two occupied by patients and the third by the staff, are built on this central portion in such a manner as to encircle it. The foundations are of stone, while the superstructure is of brick; each block is three stories in height, and additional light is secured by an ample skylight in each section. The rooms are large and well ventilated, and are constructed so as to receive the maximum amount of sunlight. To each floor is allotted one large ward for the seriously ill, as well as an isolation ward for

¹ Statutes of Quebec, 61 Vict., 1898, Cap. XC. An act to incorporate the Institut des Petites Soeurs Franciscaines de Marie.

² Statutes of Quebec, 5 Edward VII, 1905, Chap. 4. An act respecting the contract entered into between the government and l'Institut des Petites Soeurs Franciscaines de Marie, respecting the maintenance of idiots in L'Hospice Ste. Anne de la Baie St. Paul in the County of Charlevoix.

³ *Vide* footnote No. 2 on previous page.

cases of contagious disease, should such arise. Due thought has been given to the furnishing of commodious verandas, and these are placed about the buildings, giving the benefit of fresh air to the feeble, or, when ill weather prevents the customary open air exercise on the grounds for those physically fit. Electric light is used throughout the institution and the hot-water system is the heating method employed.

The hospital supplies not only its own electricity for lighting or other purposes, having installed the necessary apparatus in a nearby mountain stream which furnishes the water power, but it is able to furnish electric light to the village of Baie St. Paul as well. Its water supply is procured from the municipal aqueduct at small cost, this being brought from a pure mountain stream in the neighboring Laurentians.

The patients of both sexes are classified as follows: first, epileptics; second, idiots in whom improvement is possible; and third, idiots who are so low in the scale that they present no chance of betterment. When first admitted the patients are kept under close observation in special quarters until their mental status is definitely determined by the physician in charge, when they are assigned to the ward which they will occupy during the remainder of their sojourn in the hospital.

An excellent farm of 250 acres is owned by the community, and graded occupation for many of the patients is found here, the modern idea of light employment in the open for the defective class being thus embodied. The farm is also rendered a considerable source of revenue through the use of its products, though this feature, as in all good hospitals, is considered secondary to its value as a therapeutic aid. A selected herd of milch cows furnishes an ample supply of milk, and the raising of poultry is done on an extensive scale.

As an example of efficient and economic administration under this religious order, the hospital does not suffer by comparison with solely state institutions of similar character elsewhere; in fact, the reverse is the case. Under the rule of the Sisters the value of the whole plant and property has increased from \$45,000, which it was 15 years ago, to \$200,000 at the present day; the whole work has expanded greatly, and stands as a monument to the singleness of purpose, cohesion of effort, and devotion of this religious sisterhood.

Sister Mother Superioress Dominique is the present head of the hospital's affairs, while the government position of medical superintendent is held by Dr. E. Tremblay, the post having been created in 1905, owing to the increased number of patients cared for. At the end of 1913 there were in the institution 110 male patients and 61 female patients, making a total population of 171.

PROTESTANT HOSPITAL FOR THE INSANE.

The Protestant Hospital for the Insane, or, as it is more commonly called, Verdun Hospital, undoubtedly owes its inception to Mr. Alfred ("Fred") Perry, a well-known citizen of Montreal. From a period antedating Confederation, Mr. Perry had taken a deep interest in the subject of the care of the insane, and, in the foundation of Longue Pointe Asylum, had given valuable assistance to Sister Thérèse. While granting the Sisters full credit for the care bestowed upon their helpless charges, he yet observed that it was merely custodial care, with little or no effort to bring about recovery. This was but the natural outcome of the "farming-out" system, in which the interests of proprietors and patients are at direct variance, a fact Mr. Perry was not slow to grasp. A man of strong will, with great energy and tenacity of purpose, he resolved that at least the Protestant community should be freed from a system that was a standing menace to proper treatment, and, about 1875, began to devote himself to the task of seeing whether the existing state of affairs could not be remedied.

After many interviews with various members of the government, Mr. Perry found that it would be impossible to disturb the arrangements that had been made with the Sisters, and thereupon conceived the bold idea of founding a separate institution for his co-religionists. Having ascertained that the government had no objection whatever to the Protestants of the province establishing an asylum for the care of their own insane, provided it was done at their own cost, Mr. Perry straightway proceeded to call a public meeting, at which the whole subject was discussed.

At this meeting, held at the House of Refuge on Dorchester Street, in 1880, Mr. Perry, in conjunction with Sir A. T. Galt, Hon. James Ferrier, Thomas Cramp, Esq., and the Rev. Gavin Lang, a well-known Presbyterian divine, was appointed to take steps in the direction indicated. Several informal meetings were

held by these gentlemen, with Sir A. T. Galt as chairman, and it was found that they were all, with the exception of Mr. Perry, in favor of the erection of an asylum which should be open to Roman Catholics as well as Protestants, but conducted on different principles from the proprietary establishments. Mr. Perry, however, held out staunchly for his own views, and was, in consequence, soon left to battle alone, the committee, as such, ceasing to exist. Innumerable difficulties met him in the prosecution of his scheme, but, with unflagging zeal, he continued his efforts, and on June 30, 1881, secured, with the assistance of Mr. David Morrice, the passage of a bill entitled "An Act to Incorporate the Protestant Hospital for the Insane."¹

The Right Reverend William B. Bond, LL. D., Lord Bishop of the Diocese of Montreal; John Jenkins, D. D., LL. D.; Gavin Lang; George Douglas, LL. D.; George H. Wells; Henry Wilkes, D. D.; A. H. Munro; W. S. Barnes; William A. Hall, M. D.; Sir Hugh Allan; Andrew Allan; George Macrae, Q. C.; Charles Alexander; Henry Lyman; M. H. Gault, M. P.; Thomas White, M. P.; Peter Redpath; Adam Darling; Hugh McLennan; James Coristine; S. H. May; T. James Claxton; James Johnston; Alexander McGibbon; Alfred Perry; Leo H. Davidson, and such other persons, donors or subscribers, as might be or become associated with them and their successors, by this act were constituted a body corporate to found a Protestant institution for the care, maintenance and cure of the insane of the several Protestant denominations in the Province of Quebec.

As a safeguard against the possible introduction of the "farming-out" system, the act provided that all moneys raised by the corporation, from whatever source, should be expended upon the institution and its inmates; that the general management of affairs should be invested in a board of governors, being Protestants and residents within the Province of Quebec, said board to be composed of all life-governors,² 24 elective governors, and all properly constituted representatives of churches and national societies; that the immediate conduct of the establishment should be vested in a board of management, elected from the board of governors and

¹ Statutes of Quebec, 44-45 Vict., Chap. 50.

² At date of writing, the number of life-governors is about 180.

not less than 12 in number, who should act for three years, one-third retiring annually; that a meeting of the subscribers to the institution should be called by the parties incorporated within six months after the passing of the act for the purpose of organizing the corporation; and that the corporation should, every year, within the first 15 days of the session of the Legislature, make a full return to the Lieutenant-Governor and to both houses, showing the state of its affairs and of its receipts and expenditures.

The corporation was also given the power to frame by-laws for the management of the affairs of the hospital and the guidance of its employees. Two hundred dollars was fixed as the sum constituting a life-governor, and \$10 as that constituting an elective governor. The payment of a subscription of \$20 gave any Protestant church within the province, or any Protestant national society, the right of appointing a governor for the year for which this amount was subscribed.

In accordance with the provision in the act, a meeting of those interested was held in the Young Men's Christian Association rooms, at the corner of Victoria Square and Craig Street, on December 20, 1881, Mr. David Morrice presiding. A vote having been taken by ballot, the following 24 gentlemen were elected to the board of governors: Mr. D. Morrice; Mr. M. H. Gault, M. P.; Rev. Gavin Lang; Dr. F. W. Campbell; Dr. J. C. Cameron; Mr. Charles Alexander; Mr. Henry Lyman; Rev. Dr. Sullivan; Dr. William Osler; Mr. Alfred Perry; Mr. L. H. Davidson; Rev. William Hall; Mr. T. J. Claxton; Mr. Thomas White, M. P.; Rev. A. B. Mackay; His Lordship Bishop Bond; Rev. G. H. Wells; Mr. Warden King; Canon Baldwin; Mr. George Macrae, Q. C.; Mr. Peter Redpath; Mr. Adam Darling; Mr. Hugh McLennan, and Mr. A. A. Ayer.¹

The general meeting having adjourned, the above board of governors assembled and appointed a committee composed of the Rev. William Hall, Dr. F. W. Campbell, Mr. T. White, M. P., Mr. David Morrice, Mr. Henry Lyman and Mr. L. H. Davidson to make a report on the matter of by-laws within 30 days, and to consider the selection of a building site.

Mainly owing to the general depression of business, public interest languished, and no action was taken by this committee,

¹ *Daily Witness*, Montreal, December 21, 1881.

nor was anything done toward the carrying out of the act up to 1884. Mr. Perry, however, did not relax his exertions, finding an able coadjutor in the Rev. William Hall, and on April 12 of that year, at the instance of the Associated Board of Charities of Montreal, a public meeting was called and a delegation named to act in conjunction with the board of governors of the Protestant Hospital for the Insane, appointed in December, 1881.

As a result of this meeting, efforts to secure subscriptions were set on foot and a committee was appointed, with Mr. Charles Alexander as chairman, to choose a situation for the proposed institution.

An advertisement, reading as follows, was inserted in the daily newspapers:

Wanted to purchase, a farm of from 100 to 200 acres in the neighborhood of Montreal, with an ample supply of water, easy of approach by rail or main road.

This secured offers of a large number of locations.¹

The services of two distinguished alienists, Dr. Joseph Workman, formerly medical superintendent of the Toronto Asylum, and Dr. R. M. Bucke, medical superintendent of the London Asylum, were obtained to inspect the most promising of the places offered. These experts reported having examined 19 of the proposed sites, including properties on the Lower Lachine Road, and the island below the city; at Back River, Lachute, St. Andrews, and St. Lambert. Of these they considered one known as the "Molson Farm," consisting of 75 acres, bordering on the river to the east of the city, the most suitable, and commented thereon as follows:

Upon the whole (weighing well all the pros and cons), we are of opinion that this site possesses less disadvantages and greater advantages than any other submitted to us, and while not being by any means perfect as regards picturesqueness, elevation of land, and quality of road by which it must be approached from the city, that it is still a fair site for the proposed purpose, and probably as good a one as can be obtained.²

The choice of this property was opposed by Mr. Perry and other members of the board of governors on the grounds that, being

¹ Report (unpublished) of Site Committee, June 27, 1884.

² Report (unpublished) of Drs. Workman and Bucke on location of site for Protestant Hospital for Insane, August 7, 1884.

below the city, the water supply would be liable to contamination by the sewage therefrom, and, as situated in a purely French district, it would be less acceptable to the English-speaking Protestant community. For these reasons the location was abandoned, and for a time the selection of a site was again dropped.

During the same year (1884) the celebrated English alienist, Dr. D. Hack Tuke, after a visit to and inspection of many of the American and Canadian asylums made during that year, published, in the *Journal of Mental Science*, a severe denunciation of the wretched condition in which he had found many of the inmates of the Quebec asylums, especially those in Longue Pointe. This article, which was subsequently published in book form, under the title "The Insane in the United States and Canada," aroused such a furore that it led the Medico-Chirurgical Society of Montreal to pass a series of resolutions condemnatory of the management of these establishments and of the "farming-out" or "contract" system, and calling for an investigation of the entire method for the care of the insane poor in the province, by competent persons.

The result was, that soon after the passage of these resolutions, in November, 1884, a deputation, consisting of Messrs. George Hague, F. Wolferstan Thomas, and Charles Alexander, was appointed to wait upon the government for the purpose of urging a reform in the management of the insane of the province, and ascertaining what it was willing to do in the matter of the Protestants, about 200 of whom, it was estimated, were confined in the two proprietary establishments. At this interview the members of the government stated that they were willing to do all in their power to facilitate the transfer of Protestants from Longue Pointe Asylum to the proposed hospital, and agreed to lend the corporation \$25,000, at 6 per cent interest, toward the erection of a building, this sum to be repaid in ten equal annual instalments, the first of which was to become due five years from the date of the loan.¹

The sentiments of the government having been disclosed by Mr. Perry at a meeting of the governors, held at the *Gazette* office on April 7, 1885, Mr. Charles Alexander in the chair, it was resolved:

¹ Annual report (unpublished) of the governors of the Protestant Hospital for Insane for the year 1886.

That the following gentlemen be appointed provisional directors of the institution, and are hereby authorized to solicit subscriptions for such sums of money as may be required to purchase land, and for the erection and furnishing of the necessary buildings for establishing the contemplated hospital, viz.: Right Reverend Bishop Bond, Rev. George H. Wells, Rev. Dr. Stevenson, Rev. J. Edgar Hill, Rev. J. E. Norton, Charles Alexander, M. H. Gault, M. P., Richard White, Dr. F. W. Campbell, Dr. John Wanless, Adam Darling, L. H. Davidson, Alderman J. C. Wilson, Alderman W. D. Stroud, Alderman Richard Holland, F. Wolferstan Thomas, J. C. McLaren, Henry Lyman, A. F. Gault, William Drysdale, Alfred Perry, George Hague, and Rev. W. S. Barnes.¹

It was further resolved that Bishop Bond, Charles Alexander, J. C. Wilson, Henry Lyman, W. D. Stroud, Alfred Perry, Richard White, Adam Darling, Richard Holland, and Rev. W. S. Barnes should constitute a committee to select a site and enter into arrangements with the government for a loan not to exceed \$30,000. Three members of this committee were to form a quorum, and power was given to elect a secretary, obtain a suitable office, and enter into correspondence with kindred institutions in order to obtain information as to the establishing and proper working of the hospital. At the same time, Mr. F. Wolferstan Thomas was appointed treasurer, and Mr. L. H. Davidson, legal adviser.

At the next meeting of the board of directors, held at the residence of Bishop Bond, on June 6, the first president of the corporation was elected in the person of His Lordship the Bishop. Mr. Charles Alexander was selected as vice-president, and Mr. Edward Hollis was appointed secretary. Notice was given also that an office had been rented at 242 St. James Street (between McGill and Dollard streets) at \$50 a year, and that a table and other furniture with some stationery had been procured.

A letter from Mr. H. J. Lyall was then read. It offered a building three-quarters of a mile from Sorel, known by the name of Lincoln College, with 37 acres of land attached, as a location for the hospital, at a cost of \$33,000. This edifice, a four-story stone structure, had been erected in 1875 for a body of secular priests, who had formed themselves into a corporation under the title "Le Collège du Sacré Coeur de Sorel." Opened by them in 1876, it had been closed again in 1878, and was then held by Mr. Lyall,

¹ Minutes of meeting held April 7, 1885.

who had bought it with the idea of founding a school therein.¹ The site committee was instructed to inspect the establishment with a view to ascertaining its suitability for the purpose required.

The report presented by this committee was that, at an estimated cost of \$55,000, it could be purchased and arranged for the reception of 250 patients.² The distance of the property from the city and its inaccessibility in winter were urged against its purchase, but despite these manifest drawbacks, steps were being taken to complete the bargain when Mr. Lyall informed the directors that he had been advised to continue his school, though he was still open to an offer. The consequence was that all idea of its purchase was abandoned.

The next site considered was one known as the "Wanless Farm," which consisted of 200 acres, situated in the Parish of Pointe aux Trembles, about six miles east of the city. The distance of this property was also held to be too great, especially as it could not be reached by rail, and negotiations for its purchase likewise fell through.

A number of other sites were examined by the committee, which finally decided to report in favor of one called the "Hadley Farm," owned by Mr. J. B. Caverhill, consisting of 110 acres, on the Lower Lachine Road, the price of which was \$18,000. On the presentation of their report it was resolved by the board, at a meeting held February 20, 1886, to submit a memorial to the government in order to ascertain how far it would assist in the project. In this memorial it was set forth that, inasmuch as the Legislative Assembly had agreed to make the corporation a loan of \$25,000 toward the creation of a hospital, and that a site had now been determined upon, it would greatly facilitate the collection of further funds were the governors in a position to announce that an arrangement had been entered into with the government whereby the care of the Protestant insane would be entrusted to them as soon as they were prepared to receive them. As a basis for a contract to be entered into, the corporation therefore submitted the following: 1. That the government should pay for

¹ This building, vacant since 1888, was, in 1897, purchased by Les Frères de la Charité, who reopened it as a commercial college.

² Report (unpublished) of Committee on Inspection of Lincoln College, Sorel, June 12, 1885.

public patients at the rate of \$135 each per annum. 2. That as soon as the hospital was completed the government should cause all the Protestant insane then confined in any asylum in the province to be transferred to the new establishment, and that thereafter all persons other than those of the Roman Catholic religion becoming insane should be sent there. That if there were anything in the current contracts to prevent the withdrawal of Protestant patients from the existing establishments unless their places were filled by others, the government should from time to time, as committals of Roman Catholics were made, transfer a Protestant or Protestants to the corporation's hospital, until all of such faith so confined should have been transferred. 3. That if in any year the cost of running the institution, plus the interest on any loans and 10 per cent reserved as a sinking fund, did not amount to the average sum of \$135 per patient, then, such sum only as the cost and expenses amounted to should be paid by the government. 4. That the corporation on its part should undertake to receive the patients sent to its hospital, and to provide all suitable accommodation, care and attendance necessary, and otherwise to comply with the provisions of law applicable to them.

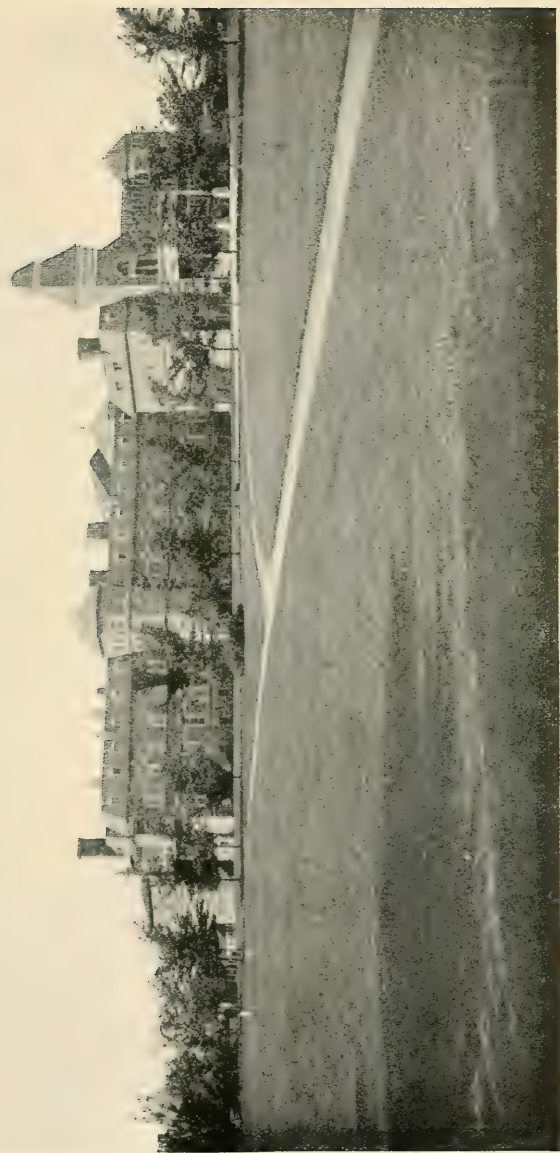
On March 24 the following reply from the Provincial Secretary was laid before the board:

QUEBEC, 17th March, 1886.

SIR: I have the honor to acknowledge receipt of yours of the 20th ultimo, transmitting the memorial of the directors of the Protestant Hospital for the Insane, and have to inform you that I have submitted the same for the consideration of my colleagues. So long as the contract system for the care of our insane and idiots prevails in the province we see no objection to informing you, if it will facilitate the operations of your Board of Directors, that the government, whenever it be established by the report of one of the inspectors of asylums that proper buildings have been erected, with all the necessary appliances for the reception of the insane, will be prepared to enter into a contract with your corporation upon the following, or, a somewhat similar, basis:

That such institution shall be subject at all times, and in all its parts, to the most thorough and rigid inspection by the government inspector, and also to existing laws, rules, and regulations, as well as to those which may hereafter, from time to time, be adopted, with reference to insane asylums.

That as to the price to be paid, while in one institution, that of Beauport, the government is paying under the existing contract \$132 per year, which is thought by some to be too high, and in the other, \$100 per year for



GENERAL VIEW OF MAIN BUILDING, VERDUN HOSPITAL.

each patient, which is thought by others to be too low; possibly a medium price, say \$116, would be considered a fair and reasonable price for each insane person admitted into your institution, and \$80 per year for each idiot, as is paid at St. Ferdinand d'Halifax. Your act of incorporation and your memorial show that your efforts are directed from charitable motives, and not with a view to realizing a profit.

The government cannot undertake the obligation of transferring the Protestant insane who are now at Beauport or Longue Pointe to your institution. Up to the present the relatives and friends of patients have selected themselves the asylum to which they wish them to be sent, and we think that it would be better to allow them still to have that option.

Allow me to express the hope that the above will meet the views and assist the efforts of your corporation.¹

I have the honor to be, Sir,

Your obedient servant,

(Signed) W. BLANCHET,
Secretary.

Edward Hollis, Esq., Secretary,
Protestant Hospt. for Insane, Montreal.

After a lengthy discussion, it was decided that the communication read did not meet the expectations of the directors, as it had been distinctly understood that all Protestant patients confined in the Longue Pointe Asylum, if not Beauport, were to be transferred to the contemplated institution when prepared to receive them. The price to be paid for each patient was also understood to be \$130. It was, therefore, resolved that a deputation, composed of the President, His Lordship Bishop Bond, and Messrs. G. Hague, F. Wolferstan Thomas, Charles Alexander, Richard White, L. H. Davidson, W. D. Stroud and Alfred Perry, should wait upon the government at Quebec, on April 1, to express the views of the meeting.

At a subsequent assembly of the directors, held April 9, the deputation presented a report to the following effect:

That they had an interview by appointment on Thursday, 1st inst., with the following members of the government: Hon. J. J. Ross, Premier; Hon. J. Blanchet, Provincial Secretary; Hon. W. W. Lynch, Commissioner of Crown Lands; Hon. E. J. Flynn, Commissioner of Railways. The deputation pointed out:

1. That unless a minimum number of patients were placed with an institution it would be impossible to carry it on with efficiency, unless at such an expense as would practically be prohibitive.

¹ Minutes of meeting held March 24, 1886.

2. That the lowest minimum might be considered as 100.

3. That all the arrangements of the committee had been on the general understanding (stated to have been arrived at with the government) that the Protestant patients in the Longue Pointe Asylum should be placed in the new asylum when erected and properly equipped. The number of such patients was stated to be about 150.

4. The deputation further pressed upon the government the reasonableness of a more liberal rate of remuneration than they had proposed, and asked that it be raised to \$132 per head, at least for the first five years; also, that the interest on the proposed loan should be made at 5 per cent, inasmuch as money could be borrowed on good mortgage security at that rate.

The members of the government, having heard their statements, replied as follows: As to the first and second, they admitted the reasonableness of the views urged by the deputation.

As to the third, they stated that it had always been their intention, and was now, to do whatever lay in their power, in good faith, to facilitate and bring about the transfer of Protestant patients from Longue Pointe to the new asylum, but they could not undertake to overrule the express wishes of the friends, or guardians, of such patients, should these friends prefer to let the insane in their charge still remain at Longue Pointe. With this reservation the government would take measures to meet the views of the directors with regard to placing the minimum number named of Protestant patients under their care, whenever a properly equipped asylum was ready for them. With regard to remuneration for patients, and a lower rate of interest, the government was willing to reconsider these points.¹

After hearing this report the meeting resolved that it be received and adopted, that the committee be continued, and that they be requested to forward a copy of the report to the government, and embody such reply as they might obtain in a communication to the board, to be made the basis on which to formulate an appeal to the public for funds in aid of a Protestant insane asylum.

An answer was presented to the board on May 14. It was to the effect that the government agreed to provide a minimum of 100 patients, provided the friends of such patients would agree to their being placed in the new hospital; that the annual rate of payment for insane patients should be \$116, and for idiots, \$80; that inasmuch as loans made to Longue Pointe and Beauport asylums carried 6 per cent interest, that to the Protestant institution must be at the same rate, since any reduction thereon might lead to a demand for a similar reduction on the part of the other

¹ Minutes of meeting held April 9, 1886.

two establishments; that before the loan was made it must be shown to the satisfaction of the government that sufficient funds were at command to pay for the land, and to erect and furnish the buildings; that before authorizing the admission of any patients the government must be perfectly satisfied with the building, its interior accommodation, furnishings and attendants, in every particular; and that it should be absolutely imperative on the corporation that the hospital should be under the provisions of the provincial laws in force, or that might thereafter be in force, as respected management, supervision, etc.¹

This letter having been thoroughly discussed, a committee was named to make preliminary inquiries as to the cost of a suitable building and appliances, as well as the expense of management, and prepare a prospectus based thereon to be submitted to the directors.

At the next meeting of the board, this committee reported the probable cost as in the neighborhood of \$100,000, and presented a prospectus which they had prepared appealing to the public to raise that sum. In this, which at a subsequent meeting was ordered to be printed and distributed throughout the province, were described the work already accomplished, the then position of the corporation, and the terms offered by the government.

Affairs being now in shape, it was resolved that a vigorous canvass for subscriptions should be inaugurated, and that a meeting of all qualified members should be summoned at an early date to elect a regular board of governors and its officers (in place of the provisional directorate) for the management of the hospital, in compliance with the act of incorporation, and to make the necessary by-laws, rules and regulations for the guidance of the same.

Pursuant to this resolve a meeting was held on October 20, 1886, at which a board of governors was elected. His Lordship Bishop Bond was made president; Mr. Charles Alexander and Mr. George Hague, vice-presidents; Mr. F. Wolferstan Thomas, treasurer; and Dr. Jno. Wanless, Hon. secretary.

By the code of by-laws prepared, the business affairs of the hospital were vested in a board of management to consist of the officers of the board of governors and not less than 12 members

¹ *Ibid.*, May 14, 1886.

elected to act for three years, one-third to retire annually, but eligible for re-election; and on November 2, 1886, the following gentlemen were made to constitute the first board of management: Messrs. Alfred Perry, W. D. Stroud, G. B. Burland, Wm. Kennedy, J. C. McLaren, James McBride, Robt. Miller, Samuel Davis, Wm. Drysdale, Hy. Lyman, W. R. Ross and Rev. Samuel Massey.

At the annual meeting held in December following, Mr. George B. Burland was made president in the place of His Lordship Bishop Bond, who had expressed a wish to be released from the duties of the office on account of the many official functions connected with his diocese. Mr. Burland continued to fill the presidency up to the summer of 1888, when, a disagreement having arisen between himself and some of the other governors, he resigned. The position was refilled on December 27 following by the election of the Hon. J. K. Ward.

There was at this time a piece of land known as the "Leduc Farm," situated on the Upper Lachine Road, which belonged to the government. This farm, it was thought by some of the governors, might answer as a site for the proposed hospital, and there was, moreover, a possibility of its being obtained as a gift from the ministry. To this end, on February 4, 1887, a deputation waited upon the premier, the Hon. Honoré Mercier. The suggestion, that the property should be granted as a site for the hospital, was favorably received, and a promise made of a definite answer at an early date. In the meantime, a committee appointed to examine the location in question reported that it was too small for the purpose contemplated, comprising only 40 acres, and also that there was no water supply on it, and no convenient means of obtaining the same, and was in consequence quite unsuitable.

A petition was, therefore, presented to the government asking whether, in view of these facts, it would be willing, in order to give effect to its intention to assist in the establishment of an institution for the Protestant insane, to donate the farm to the corporation so that it might be disposed of, and the proceeds devoted to the purchase of a site elsewhere.¹

¹ Draft memorial (unpublished) to government *re* Leduc Farm, February 23, 1887.

In answer to this petition, Mr. Mercier, after consulting his colleagues in the government, agreed to grant the corporation, in lieu of the Leduc Farm, a free gift of \$10,000, the sum at which that property was valued.¹ He furthermore agreed to make the board of governors a loan of \$15,000 for ten years at 5 per cent interest, payable in five annual instalments, the first of which should become due in five years from the date of the loan. A condition attached to these agreements was that neither of the sums mentioned should be paid over to the corporation until the land required for the asylum had been purchased.²

The estimated sum required to purchase a property and erect a building suitable for 200 patients was \$125,000, and this welcome aid from the government induced the board of governors to make a fresh appeal to the Protestant population of the province. By the close of the year 1887 the additional subscriptions amounted to \$58,139.82, making a total of \$68,139.82.³

On May 30, 1887, the Hadley Farm, selected by the site committee in the spring of 1886, was finally purchased for the sum of \$18,000. Situated in the municipality of Verdun, whence the name by which the hospital is often designated, just at the foot of the Lachine Rapids, the location chosen was an admirable and extremely picturesque one. The mountain rising behind crowned with green woods, its lower slopes dotted with villas; the mighty St. Lawrence, with its timbered islands, stretching in front; and the dancing rapids, with their musical roar, in such close proximity, made a prospect of scenic beauty difficult to surpass.

Plans and specifications for a building to accommodate 250 inmates, the cost not to exceed \$80,000, were advertised for in the Montreal, Toronto, and London (Ont.) newspapers. Those prepared by Messrs. J. W. & E. C. Hopkins, of Montreal, as most nearly approaching the requirements of the advertisement, were approved of. A condition of the approval was that a committee

¹ This farm having been subsequently disposed of by the government for \$18,000, Mr. Mercier generously placed to the credit of the hospital the extra amount received less charges, to-wit, the sum of \$7821.29.

² Report (unpublished) of committee appointed to interview the government, April 9, 1887.

³ Report of the governors of the Protestant Hospital for Insane for the year 1887.

of governors, accompanied by one of the architects, should visit some of the principal asylums in the United States, and any improvement in the plans suggested by this visit should be incorporated in them.

The highest level of the property having been selected as the position for the building, the work of excavation was begun in June, 1888. While this was being done, tenders to the extent of \$108,170 were obtained for the different portions of the structure, but before the consideration of these was entered upon, the finance committee was asked for a report on the state of the funds and the future prospects for further subscriptions. This was in accordance with a resolution of the board, passed February 15, 1888, that no contract should be given for building operations until at least \$90,000 had been subscribed, and an amount of not less than \$50,000 was at credit. The report of the finance committee was that: "In view of the present circumstances of the corporation, and the prospects of further support, it is the opinion of the committee that the resolution of the board of the 15th February last has been virtually complied with, and that the erection of the necessary buildings may be prudently proceeded with, provided the tenders received the approval of the governors."¹

The officers of the corporation at the time building operations commenced were as follows:²

President—G. B. Burland, Esq.

First Vice-President—Henry Lyman, Esq.

Second Vice-President—W. D. Stroud, Esq.

Treasurer—F. Wolferstan Thomas, Esq.

Honorary Secretary—John Wanless, M. D., L. F. P. S., Glasgow.

Honorary Counsel—L. H. Davidson, M. A., D. C. L., Q. C.

Chairman, Finance Committee—George Hague, Esq.

Chairman, Building Committee—Alderman William Kennedy.

Chairman, Grounds and Equipment Committee—Alfred Perry, Esq.

Chairman, Subscription Committee—Rev. Samuel Massey.

General Secretary—Edward Hollis.

¹ Report (unpublished) of Finance Committee, July 9, 1888.

² Report of governors of Protestant Hospital for Insane for the year 1887.

By the close of the year 1888 considerable progress had been made in the work, although the weather had been most unfavorable for building operations. Subscriptions, however, had come in but slowly, and there still remained a sum of \$29,645.58 to be raised in order to cover the contracts actually entered into. This sum, moreover, did not provide for the expense of furnishing, laying out of grounds, purchase of farm implements, etc. The board, therefore, appealed to the general Protestant public for additional help to complete the work.¹

A reason, which probably accounted, in part at least, for this paucity of subscriptions, was an attempt to prevent the construction of the hospital on the site selected. Opposition to its erection thereon was made by some of the neighboring proprietors. This, after the service upon the board of several protests, culminated in a suit against the corporation by Messrs. John Crawford and Henry Hadley, residents of Verdun, on July 28, 1888. In pleading, it was asked that for the reasons set forth in their declaration, the corporation "should be ordered to desist from erecting and maintaining on said site their proposed asylum or hospital, and be perpetually enjoined not to proceed further with their said undertaking."

The chief grounds on which the plaintiffs based their demands were that the erection of the building and the maintenance and carrying on of an asylum on the site chosen constituted a public nuisance, and was a source of injury and damage to them, decreasing the value of their property, especially as sites for villas and elegant dwellings; and that they, the plaintiffs, would be exposed to constant annoyance, inconvenience, and danger, with great risk of disease through the contamination of the air and pollution of the Rivers St. Lawrence and St. Pierre by the sewage from the hospital.

The board of governors, believing there was no foundation in fact for the complaint, and being advised by their honorary counsel, Mr. L. H. Davidson, that in his opinion the plaintiffs could not, at that stage of the undertaking at least (if at any time), maintain the said action, instructed defence to be filed on behalf of the corporation. This was done, and the case specially

¹ Annual report (unpublished) of Board of Governors of the Protestant Hospital for the Insane for the year 1888.

tried in the Superior Court before the Honorable Mr. Justice Jetté, subsequently Lieutenant-Governor of the province, on the 11th of December, 1888. After the examination of some 75 witnesses, argument was fixed for January 11, 1889, the result being that the action was dismissed with costs.¹

The case was then carried by the plaintiffs to the Court of Appeal, where, on March 21, 1891, judgment was rendered by Chief Justice Sir A. A. Dorion sustaining the decision of the Superior Court and dismissing the appeal. Leave to carry it to the Privy Council was moved for and granted, but this step was never taken, the plaintiffs withdrawing the case and paying all costs.

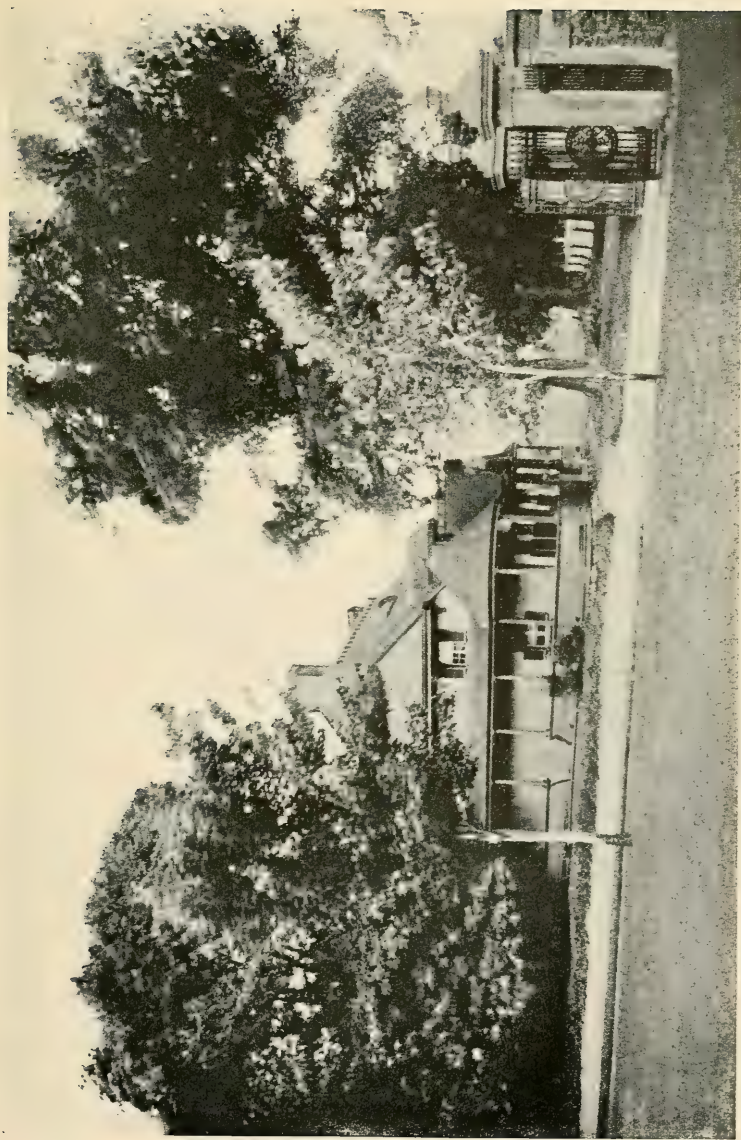
In spite of this litigious opposition the work of construction proceeded steadily onward during 1889, and by the spring of 1890 the administration building and west wing, all that the funds of the corporation permitted them to erect at that time, were completed. Dr. Thomas J. W. Burgess, assistant superintendent of the Hamilton, Ont., Asylum, and previously assistant superintendent of the London Asylum, a pupil and godson of Dr. Joseph Workman, was chosen as medical superintendent, and took charge of the institution on May 1, 1890.

At this period the financial position of the management, owing to the fact that the expenditure had been much in excess of what had been calculated upon, was an extremely strained one. So much so was this the case that but for the help accorded by the president, Hon. J. K. Ward, Mr. James Shearer, Mr. Robert Reid, Mr. James McBride, and a few others among the governors, who became personally responsible for some \$20,000 of indebtedness, the hospital would in all probability have come to an untimely end. To cover this deficit, complete the furnishing of the building, and meet the running expenses, a further sum was borrowed from the government, making the total liability of the corporation thereto \$50,000.

The first patient was received into the hospital on July 15, 1890,² and before the end of that year there had been 139 admissions. Fifty-eight of these, 39 men and 19 women, came from Longue

¹ Annual report (unpublished) of Board of Governors of the Protestant Hospital for the Insane for the year 1888.

² This patient is still a resident at the date of writing, 1916.



ENTRANCE LODGE, VERDUN HOSPITAL.

Pointe Asylum. No patients were received from the Beauport institution at this time, inasmuch as by the terms of its contract with the proprietors, the government had no power to remove any of the inmates therefrom, unless recovered. In 1894, however, this contract having expired, a number of the Protestant insane were transferred to Verdun. One of these had been a resident of the Quebec Asylum over 48 years.

At the date of opening of the establishment, the officers and board of management were as follows: President, Hon. J. K. Ward; First Vice-President, Charles Alexander; Second Vice-President, John H. R. Molson; Hon. Treasurer, F. Wolferstan Thomas; Honorary Secretary, Dr. John Wanless; Honorary Counsel, Dr. L. H. Davidson, Q. C.; Secretary, Edward Hollis. Board of Management: His Lordship Bishop Bond, Rev. Dr. James Barclay, James Brown, John Black, Rev. Dr. Cornish, M. Davis, Walter Drake, W. S. Evans, George Esplin, William Euard, M. Goldstein, George Hague, William Kennedy, Henry Lyman, James Moore, James McBride, Colin McArthur, Alfred Perry, William Rutherford, William Reid, R. G. Reid, Robert Reid, Rev. Dr. Shaw, James Shearer, I. H. Stearns, E. E. Shelton, J. C. Watson, Mrs. Dow, Miss Dow, Miss Ethel Frothingham, Mrs. John H. R. Molson, Mrs. R. G. Reid, Mrs. Robert Reid, Mrs. F. Wolferstan Thomas, Mrs. J. K. Ward.

One of the most momentous questions in the conduct of the hospital now became the maintenance of indigent patients, and on February 2, 1891, an agreement for their support was entered into between the corporation, represented by the Hon. J. K. Ward, and the government, represented by the Hon. Charles Langelier, Provincial Secretary. By this agreement, which was for a period of five years dating from the opening of the hospital, the government undertook to pay for all Protestant public patients at the rate of \$116 per annum, the province to assume and retain the absolute control of the medical service, with the understanding that it would appoint such physicians as the corporation might recommend, provided they had the necessary qualifications. Under these conditions, the medical superintendent, Dr. Burgess, became and remains a government official.

Another essential article in the agreement was that the government undertook to maintain the Protestant character of the insti-

tution, secured by its act of incorporation, and that the powers, rights and privileges conferred upon the hospital and its board of governors by the said act should not be impaired in any respect by the contract.¹

The agreement thus made was the subject of much heated discussion among the members of the board of governors, some of whom maintained that it was but a continuance of the "farming-out" system, which it had been the foremost idea of the founders to terminate. It was held by the majority, however, that inasmuch as by the charter of incorporation all moneys received from whatever source must be applied to the support of the hospital and the care of the inmates, there could be no suspicion of an attempt on the part of anyone to make a revenue out of the patients, which was the essential element in the decried system. Moreover, under the terms of the contract, the medical control was vested in the government, whose officer, in the person of the medical superintendent, had the prescribing of all treatment, medical, moral, dietetic and hygienic; the hiring and dismissal of all attendants and the regulation of the number of such to be employed; and the power to order any alteration he might see fit in the buildings that would tend in any way to the betterment of the condition of the patients.

By the end of 1891 Dr. Burgess reported that his male public wards were filled, and that to strive to crowd more patients into them would be doing an injustice to those already in residence. For this reason, and to enable him to make a better classification of the inmates, he urged the construction of the east wing at the earliest possible moment, saying:

In the matter of proper classification, one of the most important features of modern hospital treatment, we are sadly handicapped by the lack of a sufficient number of wards. In eight corridors we have to provide accommodation for men and women, public and private patients. Ere it can be a *hospital* proper, our institution must admit of as broad a classification as is consistent with safety and reasonable economy.

To associate quiet and orderly patients with the violent and noisy, the filthy and destructive with the cleanly and tidy, the dangerous with the harmless, and the suicidal with those who can be trusted, detracts much from the prospects of recovery. The delusional insane, intelligent in every

¹ Annual report of the Protestant Hospital for Insane for the year 1890, p. 23.

respect other than on a few points, should not be compelled to mix with the demented and imbecile; the infirm, requiring the added comforts of an infirmary ward with plenty of air and sunshine, should not occupy the same rooms as those physically strong; the convalescents, who need rest and quiet, should not be compelled to bear the sight and sound of acutely excited patients. Especially should demented (wet and dirty) patients be provided with separate accommodation. To scatter such through the general wards lowers the tone of all the wards, and is, to say the least, unpleasant to other patients, many of whom are hypersensitive. This class, often requiring to be fed by hand, demanding frequent bathing with changes of clothing and bedding, in short, having to be treated like helpless children, should be placed where they can receive special attention day and night.

For patients fitted for it, the cottage system, with its general atmosphere of home-like comfort, offers advantages that no ordinary ward can supply.

Given the hospital completed by the erection of the other wing and one or two cottages, we would be in a position to look for the best results, which, as at present constituted, we cannot even hope for.¹

In consequence of this report, on April 23, 1892, a deputation, composed of the undermentioned governors, waited upon Hon. John S. Hall, Provincial Treasurer; Hon. J. K. Ward, F. Wolferstan Thomas, Robert Reid, Rev. Dr. Douglas, George Hague, R. L. Gault, James Crathern, Samuel Finley, S. H. Ewing, James McBride, Rev. W. Hall, Dr. J. Wanless, Charles Alexander and Alfred Perry. The object of this deputation was to present a petition to the following effect, which was done by Mr. Thomas:

To His Honor, the Lieutenant-Governor in Council, Province of Quebec:

We, your petitioners, the governors and subscribers of the Protestant Hospital for the Insane, desire to place before you a statement of the position of the institution, and in so doing, approach you in full confidence that immediate action will be taken by the government to assist us in placing it on a sound and workable basis.

That portion of the hospital set apart for men is full to repletion, and the resident medical superintendent has notified us that he is under the necessity of refusing admission to patients of that class until additional accommodation is provided.

To meet this we see no remedy but to erect the eastern wing as originally contemplated, but this cannot be done unless the government comes to our assistance. At present, we are, by agreement entered into with the province, bound to receive all Protestant patients, care and provide for them, in accordance with a detailed schedule supplied by the government, for the sum of \$116 each per annum. That agreement expires in 1895.

¹Second annual report of the medical superintendent of the Protestant Hospital for the Insane, being for the year 1891.

We have, under the supervision of your medical officer, furnished for the use of inmates each and every thing therein stipulated for, and we find the cost for doing this amounts to \$207.36, showing an annual deficiency of \$91.36 per patient. We have no data to enable us to compare the efficiency of the treatment in the Verdun Hospital with that of other institutions in the province, but, from the medical officer's report to the government, it will be seen that 52.55 per cent of the number of admissions to the hospital during the past year have been discharged.

The governors feel persuaded that, by a compliance with this petition, the building can be completed as originally contemplated and the institution maintained at a cost of \$155 per head—a low rate as compared with similar institutions in Ontario and the United States.

In pursuance of the foregoing presentment, and having in view the placing of the institution upon an efficient and permanent basis, your petitioners respectfully submit:

1. That the hospital be empowered to issue debentures, having a currency of twenty years, to the extent of \$150,000—in sums of \$500 and \$1000 respectively—bearing interest at a rate to be agreed upon, payable semi-annually; to be secured by a first mortgage on the property of the institution.

2. To enable the governors to negotiate the said bonds on the most favorable terms, both principal and interest should be guaranteed by the province.

3. From the first proceeds of the sale of the said bonds, the sum of \$50,000 be applied to the discharge of the present mortgage debt now held by the province.

4. To secure the proper disposition of the balance remaining to the satisfaction of the government, it is proposed to appropriate \$25,000 in defraying the present floating debt of the institution, the remainder to be expended in the erection of the required buildings, with their necessary furnishings, the laying out and embellishment of the grounds.

5. It will be obvious to the government that they will be amply secured for the payment of the semi-annual interest, by deducting the same from the quarterly amounts accruing to the hospital from the maintenance of indigent patients.

Should the government accede to this proposition, we agree and bind ourselves to erect forthwith the proposed eastern wing to accommodate 200 additional inmates, also the requisite barns, stables and farm buildings.

And your petitioners, as in duty bound, will ever pray.¹

After hearing the petition read, Mr. Hall spoke in the highest terms of the excellent work that was being accomplished by the hospital, and promised a favorable consideration of the requests. Inasmuch, however, as the government had been pleased to ask for some guarantee that the hospital would not be closed at any

¹ *Daily Witness*, Montreal, April 6 and 25, 1892.

time, a meeting of the citizens of Montreal was called for June 6, 1892, to emphasize the position of the governors and bring influence to bear on the government to grant the petition.

In response to this call, a large and representative gathering assembled in the Mechanics' Institute, St. James Street, on the appointed date, the Rev. Dean Carmichael presiding. The following resolution, moved by Hon. Justice Lynch and seconded by Mr. James Crathern, was put and carried unanimously:

That this meeting, having taken communication of the memorial on behalf of the Protestant Hospital for the Insane, desires to urge in the strongest possible terms on the government of this province the granting of its requests. They do so, feeling that it can be acceded to without any unfair or undue burden on the finances of the province. Such an institution is not only a benefit to the Protestant minority, whose needs it is expressly intended to serve, but has already proved of great value to the community in the stimulus it has given to improved methods in caring for the insane, and we pledge ourselves, in so far as we can do so, the Protestant minority in this province, to use all proper means to continue to maintain it in its present efficiency without further appeal to the Provincial Government.

After the passage of this resolution, addresses were made by Sir Donald A. Smith (later Lord Strathcona and Mount Royal), Mr. W. W. Ogilvie, Mr. F. Wolferstan Thomas, Mr. Jonathan Hodgson, Mr. George Hague, Dr. T. G. Roddick, Mr. Richard White, Mr. Henry Lyman, Dr. Campbell and others. Before the close of the proceedings, the undermentioned delegates were selected to go to Quebec and express to the government the sentiments of the meeting: Hon. J. K. Ward, Mr. Charles Alexander, Mr. F. Wolferstan Thomas, Mr. Robert Reid, Mr. Alfred Perry, Mr. G. W. Stephens, Mr. George Hague, Mr. A. F. Gault, and Mr. S. Finley.¹

The issue of the debentures having been agreed to by the government on the proposed terms, plans for the new wing were prepared by Messrs. Wright & Son, architects, of Montreal. The tenders called for placed the cost of the proposed addition at \$40,571, and work was commenced forthwith in the autumn of 1892.

Through the generosity of Mr. John H. R. Molson, the hospital during the same year, 1892, was enabled to erect a gymnasium, attached to which was a bowling-alley and curling-rink. Other

¹ *Montreal Herald*, June 7, 1892.

improvements made were the construction of new farm buildings and the laying of a main sewer from the laundry to the river.

This year also witnessed the conclusion of Dr. John Wanless' long term of service as Hon. Secretary, he having expressed the wish to be freed from the duties of office. A successor was appointed in the person of Mr. Robt. Reid, who continued to act, save for one year's interruption, up to 1900.

In the following year, 1893, the old farm-cottage at the front of the grounds was converted into a very picturesque entrance lodge, and the electric fire-alarm system was introduced throughout the establishment.

In 1894 the new wing was finished, furnished and occupied, thus somewhat relieving the congested condition of the old wards. Facilities for classification were, however, still limited, and the payment of the interest on the \$150,000 of bonds, amounting to \$6750 yearly, was a very serious charge on the management, the more especially as the sum paid for the support of public patients fell considerably short of the cost of their maintenance. In connection with these matters the board had an interview by appointment with the Provincial Secretary in the summer of that year. At this interview, the Hon. Mr. Pelletier stated that the government fully recognized the fact that the rate paid by it was inadequate, and intimated that on the expiration of the then existing contract, in July of the following year, this would be remedied. He also stated that the question of aid in the erection of a separate building for idiots and the chronic, troublesome insane, either by appropriation or the guaranteeing of an additional loan, would be favorably considered. In accordance with this statement, the government, in 1895, in lieu of an increase in the rate of maintenance, agreed to assume the payment of the interest on \$185,000 for three years. This sum included the \$150,000 worth of bonds already issued, and a further issue to the extent of \$35,000 on similar conditions. By this agreement the rate of maintenance was virtually increased to \$150 per patient annually, the sum which the governors had asked. With the \$35,000 was to be erected a separate building for 100 imbecile and violent patients. Plans having been prepared by Messrs. Taylor & Gordon, the construction of this building, known as the "Annex,"¹ was begun in the

¹ Now West House.

spring and completed in the fall of 1896, at a cost of about \$36,000.

The year which witnessed the completion of the annex saw also the organization of a training school for nurses in connection with the institution, and the destruction by fire, on Christmas morning, of the hospital stables. By this misfortune, happily unattended by loss of human life, much inconvenience and considerable expense was entailed on the management through the destruction of all the horses, vehicles and agricultural implements, as well as the winter supply of hay and oats.

The summer of 1897 beheld the opening of the annex and the erection of an infirmary. By the occupation of the former, the trying conditions incident to overcrowding were greatly relieved, and the superintendent was enabled to make a classification that added much to the comfort of the entire household. The construction of the latter, which was placed in charge of a trained hospital nurse, enabled medical and surgical cases to receive many of the advantages of modern treatment that could not be afforded them in the general wards of the hospital. Other improvements made during this year consisted in the erection of a new barn and stable, the introduction of a new and enlarged electric light plant, and the increase of the water supply by the construction of an additional underground water-tank, with a capacity of 90,000 gallons.

Another notable event of the year 1897 was a visit on September 10 from the members of the Psychological Section of the British Medical Association, then meeting in Montreal. Many of the visitors were among the foremost alienists of the day, and after thoroughly inspecting the hospital they warmly congratulated the management on its efficiency.¹

At the annual meeting of the corporation, held February 15, 1898, a well-merited tribute of respect was paid to the father of the institution, Mr. Perry, by the board of governors electing him to the position of honorary president for life. At the same meeting, the Hon. Mr. J. K. Ward, owing to failing health, retired from the presidency, after nine years of good and faithful service

¹ This visit is especially noteworthy, inasmuch as it was the first time the association had met outside the British Isles since its organization in 1832.

and was succeeded by Mr. F. Wolferstan Thomas, who had been treasurer of the hospital since 1885.

The contract with the government for the maintenance of public patients having expired on July 1 following, a new one was entered into, covering a period of ten years, based on the same conditions as the previous one. The deed of guarantee for the payment by the government of the interest on \$185,000 of bonds was also renewed for a like period.

The most noteworthy improvement made during this year was the establishment of a pathological laboratory. Mr. G. B. Burland having generously offered to defray the cost of a complete equipment, the basement story of the infirmary was fitted up for the reception of the apparatus under the direction of the pathologist, Dr. J. A. MacPhail, who was sent to England by Mr. Burland for the purchase of the outfit.

In the summer of 1902, a new building for female patients was completed and opened. This structure, which had been begun the previous year on plans prepared by Messrs. Finley & Spence, greatly relieved the congested condition of the wards in the main building and brought the capacity of the institution up to 535. It was designated East House, in contra-distinction to the old annex which was renamed West House. Another important improvement, the making of which had proceeded *pari passu* with the erection of the East House, was the provision of a new kitchen, serving room and cold storage plant. In the basement of the kitchen, which was fitted up in the most modern style, were provided a bakery, a pastry room, and a store-room for general supplies. The old kitchen, when vacated, was overhauled and fitted up as an addition to the general dining room for male patients, which had previously been overcrowded. These creations and changes had been rendered possible by a further issue of bonds, guaranteed by the government, to the extent of \$65,000.

During the same summer the American Medico-Psychological Association, the oldest of American medical societies, held its 58th annual session in Montreal. This was the fourth meeting held on Canadian soil since its organization in 1844, and the attendance was the largest ever recorded on its minutes. The hospital was thrown open to the inspection of the members, the majority of whom visited it.



INFIRMARY, VERDUN HOSPITAL.

In September, 1903, the position of president was yet again rendered vacant by the untimely death of Mr. Samuel Finley, who had been elected to office in succession to Mr. F. Wolferstan Thomas, deceased, in 1900. The vacancy was filled by the promotion of Mr. James Wilson from the office of vice-president.

Of improvements made, the most important was the erection of a new steel water-tower, with a tank having a capacity of 50,000 gallons.

The year 1905 was a sorrowful one in the annals of the hospital, inasmuch as during it the venerable Mr. Charles Alexander, honorary vice-president, was called to his last home. As was justly stated, at the time, by one of the leading dailies, "Montreal's best citizen died when Charles Alexander, at the age of a score of years beyond man's allotted span, passed away." His life history was bound up with the progress of humanitarian work in the city of his adoption. Everything that had for its object the prevention and amelioration of suffering, everything that made for purity in public affairs, had his sympathy and support. A broad-minded Christian, he knew no restrictions of race or creed in his unselfish endeavors for the betterment of mankind.

In addition to Mr. Alexander, the supporters of the hospital were once more called upon to mourn the loss of a president, Mr. James Wilson, who was succeeded by Mr. Peter Lyall.

The year, saddened though it was, was not unmarked by progress. Thanks to the generosity of Mr. G. B. Burland, one of its founders and its second president, the hospital was put in possession of a detached residence for the medical superintendent. The house, a model of its kind and fitted with every modern convenience, was built and furnished by Mr. Burland from plans gotten out by Mr. Robt. Findlay. The material used was red pressed brick with cut stone trimmings, and the cost about \$25,000.

The 17th year of the hospital's existence for the reception of patients (1907) will ever be a permanent mile-stone along the march of the institution's progress, as in it the Hadley Farm of 60 acres, adjoining the hospital property on the east, was acquired. To Dr. James Douglas, of New York, a Canadian gentleman and a native of Quebec, was this magnificent gift due, the price paid for it being \$42,000. Dr. Douglas, a man of many interests and unnumbered charitable acts, was strongly attracted to the con-

sideration of the system providing for the insane of the province, from the reason that his father, the late Dr. James Douglas, of Quebec, was the founder of the Beauport Asylum and among the foremost of his time in skilfully treating and caring for this unfortunate class of patients. Dr. Douglas' original intention was to have provided a much-needed amusement hall to memorialize his father's name and good work in alienism, but the above-mentioned property being obtainable and the board having indicated its preference for its acquisition rather than the building of an amusement hall just then, Dr. Douglas promptly consummated the transaction, with the result already stated. In the deed of gift it is expressly stipulated that the land so donated shall at no time be mortgageable to the government.

Other advancements during the year consisted of the erection of a new fireproof power-house to accommodate the machinery for providing electric light, as well as that for pumping water. While this was being constructed a 14-inch water-supply pipe was laid to the city aqueduct to replace the old supply pipe, and connected with the fire pumps. By this means, in case of fire, water could be pumped directly from the aqueduct, which furnished an inexhaustible reservoir. The cost of these improvements was in the neighborhood of \$25,000.

For the first time in the chronicles of the hospital it was necessary, during 1908, to seek quarters for patients outside the hospital buildings proper, and to this end the gymnasium, which had been a gift of the late Mr. John H. R. Molson as early as 1892, was fitted up as a temporary dormitory for some 30 cases.

This step was occasioned by lack of accommodation, serious overcrowding having begun to manifest itself, as indeed was unavoidable when it is remembered that the institution's capacity for 530 was at this time burdened with 580 patients.

The provision thus made, though comfortable and sanitary, was only undertaken by the superintendent lest urgent cases might have to be refused admission; a step it was considered would violate the basic principle of the institution's birth, viz., the receiving and caring for all the Protestant insane of the province.

Plans for a new brick and stone building were made ready by Messrs. Brown & Vallance, architects; tenders were solicited;

and in the summer ground was broken for the structure, which was to be completed by March of the following year.

The financing of the construction was secured by the board of management issuing bonds to the value of \$75,000, the estimated cost of the edifice, which the government guaranteed, with interest at $4\frac{1}{2}$ per cent.

Unfortunately, early in December, after the building was roofed and the inside work well under way, a fire, carelessly lighted by some workman in one of the stoves used by the contractors for heating purposes, led to the partial destruction of the building, the damage done being such that all hope of occupying the new wards before the following summer had to be abandoned.

The delay in completion and the monetary loss entailed were matters of serious import to the board, though sincere thankfulness was felt that no loss of life had resulted, and that none of the other structures were attacked.

By September, 1909, the repairs to this new annex, known as the North West House, had been completed, and the building was opened on the 16th of that month by the transfer to it of the patients temporarily housed in the gymnasium. The erection of this building enforced the tearing down of the old ice-house, hose-house and green-house, which were situated close to it, and their replacement by larger and more modern structures elsewhere.

Though the year 1910 witnessed but few improvements, and those of comparatively minor importance, it was nevertheless one of great moment, in that during it a new contract, to cover a period of 15 years, was entered into for the maintenance of public patients. The government recognizing the justice of the plea advanced by the board that the cost of support had greatly increased during the previous 15 years, had, in 1909, appointed a committee to investigate the whole subject. Accordingly in April, 1910, the government was met at Quebec by a committee consisting of the president, Mr. Peter Lyall, Rev. Dr. Jas. Barclay, J. C. Holden and I. H. Stearns. At this conference the government agreed to increase the yearly rate paid from \$116 to \$142 per capita. In addition they undertook to pay the interest on a total indebtedness of \$325,000, being the value of the bonds issued by

the hospital and guaranteed by the government, thus bringing the yearly per capita payment up to \$165.

In 1911, thanks again to the kindness of Dr. Douglas, a much-felt want was supplied in the shape of a new amusement hall. The board of management, despite an appeal to the public, finding it impossible to secure the sum of \$130,000, the estimated cost of a nurses' home and an amusement hall, for the cost of which structures Dr. Douglas had generously volunteered to pay one-half, the project seemed likely to fall through. Under these circumstances, Dr. Douglas volunteered to undertake the erection of whichever of the two buildings the superintendent deemed most urgently needed. Much as he felt that the nurses were entitled to the comfort which is to be found only in a detached home, he felt that the patients should come first, and, for this reason, selected the amusement hall.

The contract for building was given to Messrs. John Quinlan & Co., on the designs prepared by Messrs. Ed. & W. S. Maxwell, and ground was broken on May 29. The building, which is located on the Douglas farm, is in design one of the most chaste and beautiful in the neighborhood of the city, and is known as the Douglas Memorial Hall, in memory, not of himself, which honor Dr. Douglas positively declined, but of his father, the founder of the Beauport Asylum at Quebec, the first establishment for the care of the insane to be erected in this province. It is a one-story stone and brick, fireproof structure, capable of accommodating 600 patients, with stage, dressing rooms, coat rooms, lavatories, etc., and a basement containing a kitchen, supper room and serving room, so that the many friends who voluntarily entertain the patients during the winter months may not be allowed to go away hungry after they have devoted the evening to their service. The heating plant introduced was what is known as the "Webster System," a system that had given satisfaction in other of the buildings, steam being conveyed in pipes through a tunnel from the boiler house. The fitting up of the stage with scenery, etc., was done under the direction of Mr. F. W. Taft, stage carpenter of His Majesty's Theatre, and is such that all ordinary plays can be appropriately produced.

On the wall of the entrance vestibule of the hall was placed a brass memorial tablet bearing the following inscription :

This hall is erected by his son,
in memory of
JAMES DOUGLAS, M. D.,
who came to Canada in 1827.
He was eminent as a Physician
and Surgeon, and was the Pioneer Alienist
in the Province of Quebec.

In connection with the hall, an additional entrance lodge and gateway were erected on what is known as the Douglas Farm, it being the gift of Dr. Douglas. It was his wish that the lodge should be in keeping with the hall, situated on the same property, and the idea was faithfully carried out by the architects, the house being a comfortable brick and stone, seven-room building, lighted by electricity and heated by hot water.

The cost of these structures was in the neighborhood of \$65,000.

In this and the following three years new farm buildings were also built, consisting of a barn, a root-house, a cow-stable, an implement shed, a piggery and a tool-house. These are all of the most modern character, and furnished with the most up-to-date fittings.

The same year saw the resumption of the training school for nurses, which for some years had been discontinued, owing to the paucity of the medical staff and its overworked condition. It was saddened, however, by the death of the able and energetic president, Mr. Peter Lyall, who was succeeded by Mr. I. H. Stearns, the present incumbent of the office.

In 1915 Dr. James Douglas once more came to the assistance of the institution by generously contributing \$75,000 of the sum required to erect a much-needed nurses' home. The contract for construction, amounting to \$91,000, was awarded to Messrs. A. F. Byers & Co., of Montreal. Work was begun on October 21, and it is expected that the building will be ready for occupation by the end of the present summer (1916). The structure, which is intended to house both men and women, contains 53 bedrooms. The wings are completely non-communicating, being separated by a central portion to be occupied by a janitor and his wife, who will be responsible for the cleanliness and good conduct of the

establishment. The building is fireproof, constructed of brick and stone to harmonize with Douglas Memorial Hall. It is 208 feet long by 92 feet wide, and is two stories high, with an eight-foot basement. The estimated cost, when furnished, is expected to be not less than \$115,000.

The success of the official head of an asylum depends to a very large extent upon the character of the assistance given by his subordinates, but especially upon that of the assistant physicians. Throughout its existence the hospital has been singularly fortunate in securing for assistant superintendents men of high character and professional attainments. In its initial year, owing to lack of money, the institution was forced to depend upon the services of the superintendent alone. His absences from the hospital, during that period, were but eight, and those only for a few hours at a time. On such occasions his place was filled by Dr. J. Alex. Hutchison, or Dr. A. D. MacDonald, both practitioners in the city, who generously volunteered their services. The second year (1891) saw the appointment of Dr. Jas. V. Anglin as assistant superintendent. He quitted the service in 1894 to engage in private practice, and was succeeded by Dr. J. J. Ross. In 1895 Dr. Ross also resigned to take up practice, his place being filled by Dr. G. H. Manchester, who, at the end of three years, left to become medical superintendent of the British Columbia Asylum. The lure of institution work was too strong for Dr. Anglin to resist, and on the retirement of Dr. Manchester, in 1898, he returned to his old position, but again left, in 1904, to accept the appointment of medical superintendent of the Hospital for the Insane at St. Johns, N. B., a position he still holds. His successor, Dr. C. A. Porteous, the present incumbent of the office, had served as second assistant during 1901 and 1902, and, on the retirement of Dr. Anglin, his recognized merit led to his being cabled for to the West Coast of Africa, where he was then engaged.

At the time of writing, the institution comprises five separate buildings for occupancy by patients. These, in order of erection, are the original or main buildings, the West House, the Infirmary, the East House, and the North West House. The main building, three stories in height, has a frontage of 350 feet, and is built of coursed gray limestone, with cut-stone trimmings. It comprises a central executive department, and two wings, with rear exten-

sions, to accommodate 296 patients. In front, the former contains on the ground floor the various offices and reception rooms, above which are the assistant superintendent's apartments; in rear it embraces the dining rooms and kitchen, with beneath, in the basement, the bakery, storerooms, etc., and above the assistant physicians' and matron's quarters; while in the upper story are located two large observation dormitories, one for men, the other for women, obtained by the reconstruction of the old amusement hall. Communication with the several parts of the building is obtained by means of corridors radiating from a central octagonal well, which extends unbroken to the roof, and is lighted by a skylight the full size of the same. The West House is a two-story red brick building, 125 feet long, made up of a central portion containing quarters for an assistant medical officer, and ward dining-rooms; and four corridors to accommodate 104 patients. The infirmary is a two-story stone structure, in keeping with the main edifice, and has a capacity of 19 beds, with diet kitchen, operating, and post mortem rooms attached; wide, open balconies, with a southern exposure, are provided, so that convalescing and even bed-ridden patients wheeled to them may enjoy the benefit of the health-giving breezes that sweep from the broad St. Lawrence across the verdant lawns. The East House is a two-story brick building, somewhat similar in design to the West House, while the North West House is of much the same character, but three stories in height. The laundry, engine, and boiler-rooms, and space for electric light plant are contained in two detached brick buildings some distance in rear of the hospital proper; above them rises the water-tower, which affords the requisite pressure for the distribution of water over the premises. The foregoing with the amusement hall and nurses' home, both detached structures, make up the establishment.

The institution was originally heated and ventilated by what is known as the Smead-Dowd system, but this, being unsatisfactory as regarded its heating possibilities, has been replaced by steam.

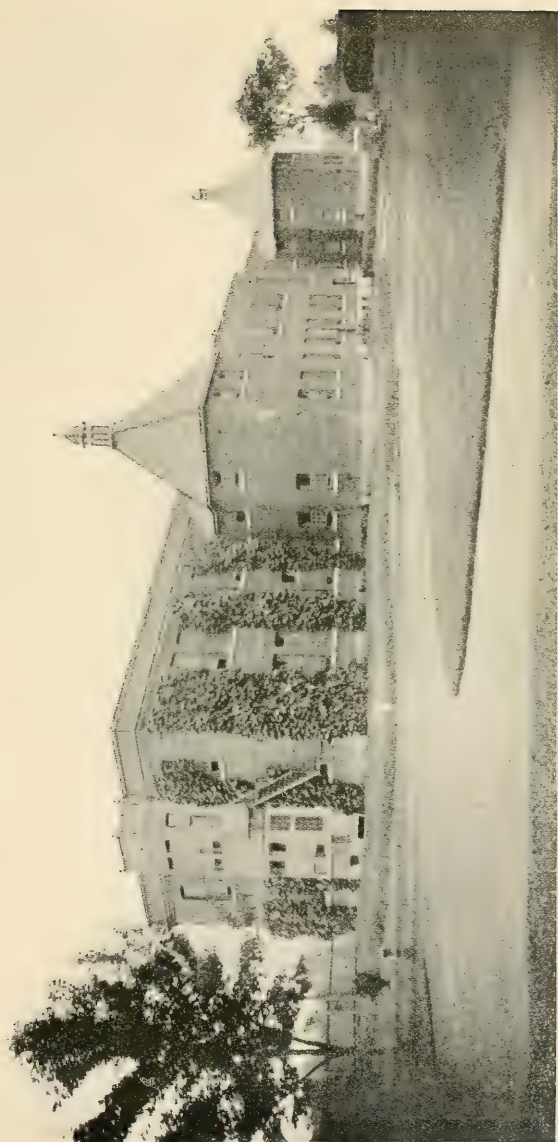
The entire capacity of the establishment is about 700, and its population at the close of 1915 was 726. Private as well as public cases are received, the former at present numbering about one-fourth of the inmates. From this it will be seen that the institution

is again overcrowded, but funds are lacking, at the present time, to increase the accommodation.

The officers of the corporation consist of a president, two vice-presidents, an honorary secretary, and an honorary treasurer, who are elected annually from the board of governors. The business affairs of the establishment are conducted by a board of management, consisting of 24 members in addition to the officers of the corporation, who are *ex officio* members thereof.¹ Neither the officers of the corporation nor the members of the board of management receive any remuneration for their services; neither, by its by-laws, can supplies for the institution be purchased from any of them. The only paid official of the corporation is the secretary to the board of management. In addition to an annual meeting of the corporation, held in February of each year, the board of governors meets quarterly to receive a report on the affairs of the hospital from the board of management, the meetings of which are held fortnightly. The quorum for the board of governors consists of ten, and that for the board of management of five members.

The medical staff of the establishment at present consists of a superintendent, an assistant superintendent, and an assistant physician, who are commissioned and paid by the government, though nominated by the hospital corporation; and a second assistant physician paid by the hospital. These officers all reside on the premises. Over and above their duties at the asylum, the superintendent and assistant superintendent deliver lectures and give clinics on mental diseases, the former at McGill University, the latter at the hospital. There is also a consulting staff composed of a surgeon, two physicians, a gynecologist, two pathologists, a neurologist, an oculist and aurist, an orthopedist, a laryngologist,

¹ The present officers and board of management are: President, I. H. Stearns; First Vice-President, Alfred Joyce; Second Vice-President, John McLean; Honorary Treasurer, James McBride; Honorary Secretary, J. Alex. Cameron; Board of Management, William Lyall, Joseph Allen, Benj. Tooke, John Patterson, James Sutherland, Rev. Dr. Barclay, D. S. Friedman, Rev. Hugh Pedley, J. Cradock Simpson, Dr. F. G. Finley, Rev. E. I. Hart, Henry Birks, His Lordship Bishop Farthing, Dr. M. C. Baker, Dr. G. E. Armstrong, W. Mayne McCombe, A. F. C. Ross and R. S. Kinghorn.



WEST HOUSE (ORIGINALLY "THE ANNEX"), VERDUN HOSPITAL.

and a surgeon dentist, who have their residence in the city, and give their services free of charge to all public cases.¹

The corporation in framing its rules, which are concurred in by the government, wisely decreed that the medical superintendent should be *ipso facto* as well as *ipso jure* the head of the entire establishment, and as such be responsible for the efficiency of all departments. He is accordingly clothed with authority commensurate with his responsibility. In him are vested all things pertaining to discipline, the treatment of patients with regard to medication, diet and hygiene, and the engagement and dismissal of all officers and employees.

As regards inspection, the hospital is subject to the statutory visitations of the government inspectors and grand jury. In addition, there is a visiting committee appointed by the board of management from among the governors. This consists of two governors for each week in the year, whose duty it is to visit the institution weekly, and report anything they may deem necessary to the board of management. The average annual rate of maintenance being nearly \$200 per patient, whereas the government allowance is but \$165, the deficit has to be made up from subscriptions derived from the charitable public. There is, besides, the interest obtained from an endowment fund now amounting to over

¹ The consulting members of the medical staff are: George E. Armstrong, M.D., LL.D., D. Sc., Professor of Surgery, McGill University, and Surgeon to the Royal Victoria Hospital; F. S. Finley, M. B. (London), M. D., Professor of Medicine, McGill University, and Physician to the Montreal General Hospital; J. J. Ross, M. D.; F. A. L. Lockhart, M. B. (Edinburgh), M. D., Associate Professor of Gynaecology, McGill University, and Gynaecologist to the Montreal General Hospital; J. A. MacPhail, B.A., M.D., Professor of History of Medicine, McGill University; Joseph Kaufmann, M.D., Demonstrator of Pathology, McGill University, and Associate in Medicine at the Royal Victoria Hospital; D. A. Shirres, M. D. (Aberdeen), Lecturer in Clinical Neurology, McGill University, and Neurologist to the Montreal General Hospital; W. G. M. Byers, M. D., Lecturer in Ophthalmology, McGill University, and Assistant Oculist to the Royal Victoria Hospital; J. A. Nutter, M. D., Demonstrator of Orthopedic Surgery, McGill University, and Assistant Orthopedist to the Montreal General Hospital; R. H. Craig, M. D., Lecturer in Rhinology and Laryngology, McGill University, and Assistant Laryngologist to the Montreal General Hospital; J. S. Ibbotson, D.D.S., Dental Surgeon to the Montreal General Hospital.

\$208,000. This fund, which is steadily increasing, was inaugurated in 1894 by Mrs. John H. R. Molson with a generous donation of \$10,000, given to establish the Frederick Frothingham Memorial Fund in memory of her late brother.

The motto adopted by the earliest directorate of the hospital was the acme of progress commensurate with the means at their command, and under the régime of the successive presidents and their coadjutors this motto has been strictly adhered to. The constant aim of all has been to keep abreast of the times, and to have those connected with the working of the institution fully and intelligently conversant with the most advanced ideas of the day, thus securing the best results in the case of those confided to their care.

From the outset of the hospital's career it has been the aim of the superintendent to conduct it according to the most modern ideas. Non-restraint has been the system adopted from the beginning, and, conscious of the fact that to avoid the use of restraint, it is absolutely necessary to provide employment and amusement, no effort has been spared to make full use of these auxiliaries. Writing on this point in his annual report for 1897, he says:

A wise man has wisely said: "If you cannot cure an insane patient, the next best thing is to make him as happy as possible." Broadly speaking, the foundations of recovery in the insane, and, failing recovery, happiness, are in pleasant surroundings, attention to physical comfort, freedom as far as is compatible with safety, and the provision of suitable employment and amusement. The old saying that His Satanic Majesty always finds work for idle hands is as applicable to the insane as to the sane, and employment, properly directed, is among the chief curative factors in the treatment of most forms of mental disorder. If it does not cure, it at least adds much to health and happiness, and goes far to lessen excitement, noise, destructiveness and the necessity for restraint.

In the endeavor to occupy patients, the amount of work done is not regarded as the primary object, but rather how labor can best be made subservient to treatment. In other words, the employment of patients is looked upon not as a means to lessen expense, though, incidentally, this can also be generally accomplished, but as a means to benefit them by distracting their thoughts from their troubles, real or imaginary. Freedom, so far as compatible with safety, has also been made a cardinal principle in the management of the institution, and with no untoward results.

ST. BENEDICT JOSEPH ASYLUM.

This institution, St. Benedict Joseph Asylum, is essentially the child of a religious monastic order, the Congregation of the Brothers of Charity; having been founded by them in 1885 and fostered by their care during the 30 years of its existence. No sketch of its establishment and aims would be in any sense complete without some description, brief though it be, of the parent body, and how, like many another charitable organization, it grew through the years from littleness to greatness.

From a historical resume of the asylum's history,¹ which is freely quoted in the present article, we learn that the Congregation of the Brothers of Charity was established as the direct outcome of efforts on the part of a noted Belgian divine, the Rev. P. J. Triest, titular canon of St. Bavon in Ghent. His desire was to alleviate in some measure by organized charity the sufferings of the civil population of Belgium, his object being achieved in 1807. This unhappy country, harried and devastated as it had been by the French following the Revolution, was invaded by them in 1792 and knew naught but travail of both body and spirit until a concordat was signed between Pope Pius VII and Napoleon in 1801.

From its modest origin in 1807, the order has had a history of unqualified success for over a century, and in 1907 had opened numerous refuges for the care of sufferers from ailments both physical and mental, and had formed many educational institutions for Catholic boys and youths. In this year (1907) the establishments numbered no less than 44, directed by staffs aggregating nearly 1000, all members of the order. The figures representing those who benefit by its efficient supervision are very large, and include some 9000 boys and youths, chiefly from families in poor circumstances, 450 deaf mutes and blind, 450 juvenile delinquents, 1000 defectives of tender years, while 800 aged men and over 6000 insane patients are beholden to this charitable body for their care and treatment. The educational department gives instruction to over 1600 pupils in the various boarding schools.

The activities of the congregation are widespread, and, though of Belgian origin, it has extended its work to England, Ireland, Canada and the United States.

¹ A sketch, "St. Benedict Joseph Asylum for the Insane, Epileptic, Disomaniac, etc., Founded and Managed by the Brothers of Charity (Longue Pointe, near Montreal, Canada)," kindly furnished by Rev. Brother Casimir.

As explanatory of its truly commendable record, its growth from small beginnings, its religious tone and its discipline, no excuse is necessary for the following extracts verbatim from the historical sketch to which reference has previously been made; the diction alone, with its flavor of quaintness, renders it worth the reading:

And do not ask where they found the money, the men, the brains, the lands and material to create and maintain all these flourishing institutions; it is a mystery the writer of these actual notes is unable to solve, unless we agree together that God himself has taken the whole congregation under His immediate protection and means to use it as an international instrument of salvation and mercy.

Do not even ask whether, in the coming day of judgment, thousands of these anonymous Brothers who, during a century already, have so splendidly—and silently—spent their heart and youth and life for charity's sake, will or will not raise and stand against hundreds and thousands of millionaires into the hands of whom millions were a curse and an instrument of perdition; for this is the secret of God, and He alone knows the day, the way—and the sentence.

Let us merely have, on the sly, a look over the actual constitution of the congregation we are analyzing in order to draw some few instructive and practical conclusions from our *enquete*, as science itself has a social value in the only measure that it can express itself by practical results and applications.

In the special domain, we may condense our observations in very few words, as the strength and wonderful vitality of the congregation stand on a treble basis:

- (a) Unity, practicability and immutability of aim: Charity.
- (b) Unity of commandment.
- (c) Passive obedience of every subordinate to the only general superior, be that subordinate an assistant general superior or a juvenist.

And that's all—because it's enough.

And to subscribe to this last conclusion, one needs only to know what is meant amongst Catholic monks, friars and nuns, by the vow of obedience.

Once more, we have nothing to do actually with theological and denominational appreciations; these notes are exclusively written at a technical point of view, in order to show to specialists in medico-psychological sciences, whether they be Catholic or Protestant, Methodist or Anglican, Agnostic or Hebrew, Buddhist or Mohammedan, how it happens and has happened that, without a dollar of initial capital, without any political and social influence, credit or official encouragement, and in spite of the almighty (European) Revolution and revolutionist, indifferent or antipathetic governments of the last century, a poor little congregation of anonymous and unknown Catholic Brothers of Charity has comparatively done more in a hundred years for the systematical bettering of the insane's

condition, for promoting the welfare of the poor and unfortunate, for saving children and youths from vice and perdition, for sheltering, educating, helping or treating orphans, destitute boys, epileptics, workers, people of all conditions addicted to alcohol, morphia, cocain, opium, etc., and for relieving old folks, invalids, paralytics, incurable and homeless patients than the whole State of New York, for instance, has been able to realize in the same lines since the arrival of the Pilgrims in the New World, notwithstanding all the millions and hundreds of millions that said state, together with individual philanthropists, have been throwing away in order to organize social works and benevolent institutions, refuges, hospitals, sanitariums and insane asylums.

Let us therefore give a succinct definition of that special vow of obedience upon which stands the superhuman strength and undeniable excellency of such religious institutions as the Congregation of the Brothers of Charity, and let us hope that such definition will help the reader to make out what should be done, not only in America, but all over the wide world, in order to reorganize public, national and social assistance upon a rational basis, by providing the medical profession and more especially specialists in psychiatry and superintendents of sanitariums, hospitals and insane asylums, with staffs of attendants and infirmarians, subordinate helpers and interns upon the indefatigable devotion and specifical knowledge, conscientiousness, discretion and loyalty of whom they could rely in any possible circumstances and emergencies, and, above all, by completing that stupendous reform in such a scientific way that every dollar and cent voted down by commonwealths or by individuals for charitable purposes, would in the future reach integrally their full destiny.

But as it is, we deem it sufficient to prove that, with a personnel of infirmarians, helpers and attendants trained to obedience according to such principles, motives and convictions, the superintendent and medical bureau of any asylum, hospital or sanitarium may feel in full security. And by the same way, the worrying problem of salary and wages is settled once for ever, since the Friar, Sister or Brother of Charity never can expect nor ask a nickel for the work and overwork of their whole life. They labor for God and for nobody else—and they rely upon nobody else but God to settle the bill. When they join the congregation, they receive, frequently once for all, a cagoule, a cassock or a rough uniform into which they will live, and die, and be buried; they will also require five or six pairs of heavy shoes and as many sets of coarse-grained underwear for their whole lifetime, and that's all!

As to the grub, their vows of poverty and obedience oblige them to be satisfied with any foodstuff and eatables that their superior will present them with; and here also, that's all.

And there you are, dear Doctor, with the kind of aid and attendant you were looking for.

He is told to scrub the floor: he'll scrub the floor; told to remain in the kitchen and peel potatoes for months and years: he'll peel potatoes for months and years; told to take charge of a ward of epileptics or idiots

and to comply verbatim with all the instructions of the visiting doctor: he'll take charge and comply verbatim, even if the doctor orders him to do some overtime or to get up every other hour during the night to attend to a special patient.

And if ever something unforeseen happens while the doctor is absent and out of telephone reach, such an attendant will not fold his arms and wait for positive instructions; he will say and has to say to himself: I am ordered to obey the doctor in every one of his prescriptions. Now, in this actual emergency the doctor, were he here, would order me to do such and such a thing. Therefore I must actually do such and such a thing in the very same wise as if the doctor were here—and then report. And he does it, and then reports. And that's all.

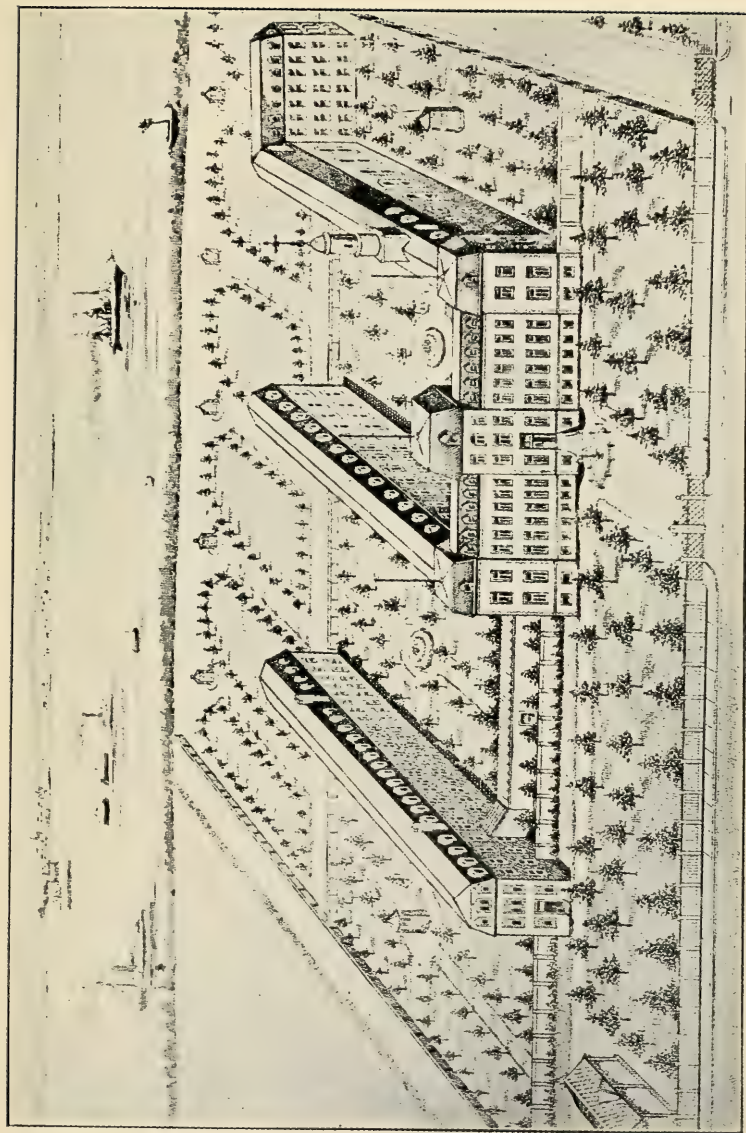
And such is the technical reason why the Brothers of Charity, in the very first century of their congregational existence, and in spite of manifold vicissitudes, and opposition, and drawbacks, and hardships, are nowadays proprietors and managers of so numerous and various institutions in Belgium, British Isles, Holland and North America; and the reason why they are able to do so much for the welfare of mankind, for the scientific treatment of nervous and mental diseases, and for the redemption, protection, salvation and consolation of so many thousands of homeless invalids, children and orphans: they obey—and that's all. Their only aim on earth is charity—and that's all. And in so far as the technical treatment of insane, epileptic, dipsomaniac, etc., is concerned, charity, for them, assumes the special signification of providing, practically without cost, the medical profession and superintendents in charge of hospitals, sanitariums, asylums, etc., with thoroughly trained helpers and all-round reliable attendants—and that's all.

And first of all and above all, the superior general of the whole congregation is one—and here, more than ever, that's all.

Now, we foresee that someone, here, would probably say to his own self: How great and even formidable must be the manifold responsibilities of such a general superior! And this also would be a mistake. As a matter of fact, that general superior himself has nothing else to do but to obey, as every one of his thousand brothers do obey. And whom is he bound to obey? In his actual capacity of general superior, and abstraction being made of his normal submission to the Catholic hierarchy, he is bound to obey nobody, as otherwise he would not be the general superior.

But in his actual capacity of a Brother of Charity, he is nevertheless bound to obey, if not someone, at least something—and this "something" is the organical constitution of his congregation. And that constitution itself is enclosed and summed up into one word, and that word is Charity—and that's all.

The St. Joseph Benedict Asylum, granted provincial charter on December 10, 1885, is situated some three or four miles east of the City of Montreal, having the villages of Longue Pointe and Pointe-aux-Trembles on either hand. Its nearness to the St.



ST. BENEDICT JOSEPH ASYLUM.

Lawrence River, on the north bank of which it stands, serves to invest the scenic surroundings with great beauty ; and the wooded islands of St. Helen and Grosbois in the near distance, the Beloeil and St. Bruno mountains in perspective on the southern bank of the river, form a splendid picture.

The building itself is three stories in height with dormer roofs and consists of a central portion, with two large wings, each springing at right angles from it, and forming as it were one end and two sides of a rectangle ; paralleling these wings at a short distance on the east is another building of the same length and of similar general construction, connected with the main portion by a covered passageway. The institution is built of stone and brick and comfortably furnished, a feature being made of individual rooms ; it is sufficiently commodious to permit of excellent classification sectionally, depending on the type of case, the alcoholic, epileptic and psychiatric patients each having separate administration and accommodation according to the group in which they fall. The grounds are extensive and are well laid out with trees, shrubs and flower beds, the imprint of Belgian skill at gardening manifesting itself even in the harsher climatic conditions of Canada.

The medical affairs of the hospital are under the general direction of Dr. Geo. Villeneuve, medical superintendent of the St. Jean de Dieu Hospital for Insane, Longue Pointe, and Dr. J. P. Deschatelets, who acts as visiting physician. Modern ideas of treatment and medical management prevail, including recreation and occupational aids. The percentage of recoveries among the curable types averages well up when compared with the figures of like establishments elsewhere.

The economic side, as distinct from the medical side of the administration, is entirely in the hands of the Brothers of Charity, and, as ever when duty and obedience go hand in hand, under intelligent and wise supervision, the result is efficient management.

At the close of 1913 there were 32 alcoholics and 78 insane, including epileptics, in the wards of the Retreat.

THE CARE OF THE INSANE IN NEWFOUNDLAND

Newfoundland, being a crown colony, does not properly come within the scope of a history dealing with the care of the insane in Canada.

The establishment of the Asylum for the Insane at St. John's was due to the efforts of Dr. Henry Hunt Stabb,¹ who settled in the colony about the year 1840. He found at St. John's about six males, called maniacs, occupying the basement cells of the old Fever Hospital; they were chained to benches and walls, with straw for bedding, and their food was passed to them by means of tins tied to the end of long poles. Dr. Stabb began an agitation in favor of better housing and treatment for these poor sufferers, and after repeated efforts induced the government to lease a small cottage, called "Palks," on the Waterford Bridge Road. Ten patients were removed to this building and Dr. Stabb became the attending physician.

In the year 1848 several residents of St. John's promised donations provided the government would build a proper asylum. Miss Dix, who visited St. John's that year, offered a donation of £100, and took great interest in the work, collecting other subscriptions from abroad. In the end the government, at the earnest solicitation of the Governor, Sir G. De. Marchand, consented to the erection of an asylum and appointed Dr. Stabb to visit the various continental and English institutions for the purpose of studying their methods of management.

The foundation stone of the present asylum was laid in 1853. The building then consisted of a central block for physicians' residence, kitchens, engine-rooms, etc., and a west wing attached to the center building, containing a lower ward for the males, an upper ward for the females, and an attic for males. The capacity of this building was 45 males and 30 females. It was finished and occupied in 1855.

In 1863 it was found necessary to build an east wing, corresponding to the west wing, and accommodating 60 beds. This was occupied by all the female patients.

¹ See Biography, volume IV.

In 1873-1876 two additional wings were erected in order to provide for the noisy and violent classes of patients. These wings accommodated 80 patients.

The asylum stands upon an elevation at a junction of two rivers, one of which flows through the property. The water supply is brought from Mondy's Pond, a distance of two miles, by means of stone pipes.

Dr. Stabb continued as superintendent until 1889, when declining health caused his retirement. He died on the 17th of May, 1892. The present superintendent is Dr. John George Duncan, and the capacity of the asylum in 1914 was 270 beds.

The asylum is under the control of a board of commissioners, appointed by the Governor in Council, consisting of three persons, one a duly qualified medical practitioner. They are required to visit the asylum at least twice in each year, and to make a report annually to the Governor in Council regarding the condition and management of the asylum.

PART V
BIOGRAPHIES IN THE
UNITED STATES

DR. GEORGE S. ADAMS.

Dr. George S. Adams, former superintendent of Westborough State Hospital, Massachusetts, died at Stamford, Conn., on March 16, 1913. He had been ill with influenza for three days when an exacerbation of an old nephritis resulted in a rapidly fatal uræmic coma.

He was born of Scottish parentage at Norwich, Conn., February 7, 1848.

Beginning life as a machinist, he educated himself by wide reading and through night schools. At the age of 28, in 1876, he graduated from Hahnemann Medical College, Philadelphia. He later engaged in general practice in Massachusetts for ten years.

In 1886 he was appointed an assistant physician at Westborough, coincident with the opening of the hospital, and five years later, on the resignation of Dr. N. Emmons Paine, he became superintendent. During the following 20 years he administered the hospital with ability, and his long and worthy service was most creditable. He resigned in May, 1912, to become medical director of a sanatorium at Stamford, Conn.

For 20 years he was also a lecturer on clinical psychiatry at Boston University, a record all the more noteworthy when one remembers how limited had been his early school training.

He was an executive of acknowledged ability, and an able and kind-hearted physician, deeply interested in whatever made for progress in medicine; resourceful, stimulating to his co-workers and beloved by his patients.

DR. GEORGE ALLEN.

Dr. George Allen died at Gowanda, N. Y., on the 14th of November, 1897, at the early age of 44 years. In that brief time he had made an enviable record as a man, a citizen, a scholar, a physician and a psychologist. Honesty and sincerity of purpose and a contempt of shams were his leading personal characteristics.

He was quiet to the degree of reticence and one of the few men in the world who do not talk enough.

He was born in Poultney, Vt., and educated at Rochester University and at Hahnemann Medical College in Philadelphia. After he graduated he was an interne at Ward's Island Homeopathic Hospital in New York City, in which were two wards devoted to the chronic insane, who had been transferred from the city asylum to relieve its overcrowded condition. He was especially interested in these mental invalids, and spent much time in studying the various conditions of mental aberration. Subsequently he removed to Waterville, N. Y., and engaged in the general practice of medicine for more than 11 years. Being appointed in 1890 first assistant physician at the Middletown State Homeopathic Hospital, he served there very efficiently for seven years.

He wrote careful, interesting and exhaustive papers upon "Circular Insanity," "Paranoia," "Some Statistical Facts Concerning Insanity," and "Phthisis Among the Insane." He also contributed other brief and thoughtful articles to various medical journals throughout the country.

In May, 1897, Dr. Allen became superintendent of the Gowanda State Homeopathic Hospital, at Collins, N. Y., but after a brief service his health failed, and he died in November of the same year.

DR. HENRY E. ALLISON.

Henry E. Allison, M. D., was born December 1, 1851, at Concord, N. H. He received his preliminary education in the public schools of his native city, later attending Kimball Union Academy at Meriden, N. H., where he graduated in 1871. In the same year he entered the classical department of Dartmouth College, where he graduated with honors in 1875. After graduation he taught in the high school of Hillsborough Bridge, N. H., and during the following year attended the course of lectures at Dartmouth Medical College, where in June, 1878, he received the degree of M. D. In August he became an assistant physician at the Willard Asylum, New York, an institution then containing some 1200 patients. He remained in charge of various medical departments of the service until March, 1883, when he resigned to pursue a



DR. GEORGE S. ADAMS.

post-graduate course at the New York Polyclinic. He then entered upon the general practice of medicine at Waterloo, N. Y., where he remained some 14 months, meeting with excellent success. At the urgent request of the Board of Trustees of the Willard Asylum he returned in 1884 to that institution as first assistant physician, after passing the state civil service examination. On July 1, 1889, he was appointed medical superintendent of the State Asylum for Insane Criminals at Auburn, N. Y., which at that time contained 219 patients. By virtue of this office he also became, by statute, a member of the commission created by the Legislature to erect a new asylum for insane criminals at Matteawan, Dutchess County, to which upon its completion the inmates of the old Auburn Asylum were transferred on April 25, 1892. He became medical superintendent and treasurer of this institution, now known as the Matteawan State Hospital. The total cost of the buildings and grounds was in the neighborhood of \$900,000; the hospital has accommodations for 550 patients.

Dr. Allison was elected president of the Seneca County Medical Society in 1886; president of the Seneca County Medical Association; a member of the Dutchess County Medical Society, of the Newburgh Bay Medical Society and of the American Medico-Psychological Association, and an honorary member of La Société de Médecine Mentale of Belgium.

On October 8, 1884, he married Miss Anna M. DePuy, of Kingston, N. Y. On February 24, 1889, at Ovid, N. Y., he united with the Presbyterian Church and later became a member and elder of the First Reformed Dutch Church at Fishkill Landing, N. Y.

On November 12, 1904, his friends were astonished to learn of his death, after having been confined to his bed for three weeks with nephritis. Always modest, and even diffident, he had given no sign of the burden he carried. The vexations and anxieties of his administration he confided to none, and none suspected the insidious undermining of his strength. He organized and developed the Matteawan State Hospital. His patience, his attention to detail, his conscientiousness, had been severely taxed, and he was unable to resist the more or less acute disease which terminated his life.

He inspired the confidence of acquaintances and the affection of his friends. The genial side of his nature was shown in his relations with children, whom he always attracted. He possessed the rare faculty of never offending and of never sacrificing his principles. In the many contributions made by Dr. Allison to the special departments of mental medicine and sociology and in his wise organization of the State Hospital at Matteawan, he left a record of a well-spent life, which deserves a proper and lasting memorial.

DR. JUDSON BOARDMAN ANDREWS.

Judson Boardman Andrews was born in North Haven, Conn., April 25, 1834. His preparatory education was received at the Hopkins Grammar School of New Haven, from which he entered Yale College and graduated A. B. 1855 and A. M. 1858. After graduation he taught school until he began the study of medicine at Jefferson Medical College in Philadelphia in 1857. At the close of the lecture course he resumed teaching in Saratoga County, N. Y., and was thus engaged at the opening of the war.

In the spring of 1861 he joined a company of zouaves which had been organized and drilled by Colonel Ellsworth. The death of this officer, whose family resided in Mechanicsville, where he was teaching, aroused his patriotic ardor. He enlisted in the 77th Regiment, New York Volunteers, which was recruited in Saratoga County, and was elected captain of a company. The regiment was assigned to Franklin's Corps of the Army of the Potomac, and took part in the Peninsula campaign against Richmond, participating in the siege of Yorktown, the battles of Williamsburg, Mechanicsville, Savage Station, White Oak Swamp and Malvern Hill. After the retreat to Harrison's Landing in July, 1862, he resigned his commission on account of ill health, and returned to New Haven, where he completed his medical studies and graduated from the Yale Medical School in February, 1863.

To fit himself for army service he entered the Germantown Hospital, Philadelphia, as medical cadet, and in July was commissioned assistant surgeon and assigned to the 19th Connecticut Volunteers, on duty in the fortifications about Alexandria, Va. When the regiment was subsequently changed from infantry to

heavy artillery, it was designated the 2d Connecticut Volunteer Artillery and was assigned to the 6th Army Corps, with which it served during the war. It took part in the battle of Cold Harbor, in which it lost 129 men killed and mortally wounded. This gave it the first place among regiments of the Union Army in members killed in any single engagement, while its losses in killed during the war (254) make its record a notable one.

In July, 1864, the 6th Corps, to which it belonged, was sent to the defense of Washington and to the Shenandoah Valley under Sheridan, where it was engaged in the battles of Winchester, Fisher's Hill and Cedar Creek. In the following December it returned to Petersburg and fought at Hatcher's Run and at Little Sailor's Creek, and was present at the surrender at Appomattox. During this active service Dr. Andrews followed the fortunes of the regiment, doing duty on the field in immediate care of the wounded and in the hospital of the division.

In 1867 he was appointed third assistant physician in the New York State Lunatic Asylum at Utica, under the charge of Dr. John P. Gray. In 1871 he became first assistant, and continued in this position until 1880, when, on the opening of the Buffalo State Hospital, he was appointed superintendent of that institution, a position which he held until his death.

On becoming a resident of Buffalo Dr. Andrews was made lecturer on insanity in the Buffalo Medical College and later was elected professor of psychological medicine.

In 1886 he was elected president of the Erie County Medical Society. On coming to Utica he was made a member of the Oneida County Medical Society, and in 1874 he was elected a permanent member of the New York State Medical Society. He was one of the founders and one of the most prominent members of the New York Medical Association, and was president of that organization in 1892. He was president of the section of Psychological Medicine and Nervous Diseases of the Ninth International Congress, held in Washington in 1887, and in 1892 was elected the first president of the American Medico-Psychological Association, formerly the Association of Medical Superintendents of American Institutions for the Insane. During his professional career he was a frequent contributor of papers to medical societies and journals. He was for ten years an associate editor of the

American Journal of Insanity and wrote extensively for its columns. His articles on "Phosphoric Acid" and "Chloral" were frequently quoted by medical journals and by writers on materia medica and practice at home and abroad.

Dr. Andrews was an advocate of state care for the insane, and aided materially in establishing the system. In the Buffalo hospital he inaugurated and carried to a successful issue the training of attendants as nurses upon the insane. As one of the pioneers of this important movement the Buffalo school furnished an impetus to, and served to popularize, the systematic training of nurses for the insane in the United States. Dr. Andrews was an able, active, energetic worker in his chosen field of labor, and the success of his career as a practical alienist was fully attested by the history of the Buffalo State Hospital and his enviable record at Utica. He died in July, 1894, after an illness of more than a year.

DR. WILLIAM MACLAY AWL.

William Maclay Awl's parents were natives of Pennsylvania, and both of English descent. He was born May 24, 1799, and began to study medicine in 1817 in Harrisburg under Dr. Samuel Agnew, and entered the medical department of the University of Pennsylvania in 1819, but did not obtain a degree. In 1834 he received an honorary degree of M. D. from Jefferson Medical College, and in 1837 a like honor from the Medical College of Ohio at Cincinnati.

During the first year of his practice his attention was directed especially to surgery, but, becoming interested in insanity, he abandoned surgery and devoted the remainder of his life to its study. In 1826 he came on foot, carrying a knapsack, from Harrisburg, Pa., to Lancaster, Ohio. From Lancaster he removed to Lithopolis, in the same county, thence to Somerset, Ohio, and finally, in 1833, to Columbus, where he lived (with the exception of two years at Dayton, Ohio) until 1876.

He was tall and slender, well proportioned and vigorous, with a fair complexion, red, or auburn hair, and blue eyes. Owing to an accident sustained in early life, he had persistent choreiform contractions of the sterno-mastoid muscles of the left side, which gave him an appearance of restlessness which did not exist.

He was a fine anatomist, and in the early part of his career inclined to surgery. In 1827, as preliminary (for safety) to the removal of a "tumor, hard and irregular in form, cartilaginous in structure, from the neck of a little girl, he tied the left common carotid artery, the first time the carotid artery had been tied west of the mountains, and the fourth in the United States." The patient made an uneventful recovery, and the case was reported by the operator in the *Western Medical and Physical Journal*.

In 1835 Drs. Daniel Drake and Awl and other prominent members of the profession assembled in Columbus upon January 5, and founded the Ohio State Medical Society, under the name of the Ohio Medical Convention.

This medical convention, which met in the First Presbyterian Church, discussed the propriety of establishing a hospital for the care of the insane and a school for the education of the blind, and sent a memorial, embodying their discussions, to the Legislature. Before the close of the legislative session an appropriation was made for the erection of a hospital for the insane at Columbus and a site was purchased. The building was completed in 1838 and Dr. Awl became superintendent. In 1837 he headed a movement for the establishment at Columbus of schools for the blind and feeble-minded, and the original resolutions (which became a law), in his own writing, properly framed, hang in the entrance hall of the School for the Blind in the southeastern part of the city. The school for the feeble-minded was not established until the sixties.

He was president of the Association of the Superintendents of American Institutions for the Insane from 1848 to 1851.

Dr. Awl was married January 28, 1830, to Miss Loughy, and had five children, all of whom, with their mother, survived him. He died in Columbus, November 19, 1876, from an attack of cerebral hemorrhage sustained some months before.

DR. ROBERT F. BALDWIN.

Dr. Robert F. Baldwin, the eldest son of Dr. A. Stewart Baldwin and Catherine Mackey, was born in Winchester, Frederick County, Va., on August 16, 1829. After a training at the academy in Winchester he entered the office of his father and uncle as a

medical student. Subsequently after a year (1848-9) at the University of Virginia he graduated at the University of Pennsylvania in medicine in 1851. After a summer in hospital practice in Philadelphia he returned to Winchester and entered into partnership with his father.

At the beginning of the Civil War in 1861 he was commissioned a colonel of militia and assigned to the 31st Virginia Infantry. While attempting to check the advance of a superior force under General Lander near Bath, in West Virginia, after a gallant resistance he was captured, with his command. In this action he bore himself with such gallantry and cool courage as to excite the admiration of General Lander, as expressed in appropriate terms in after years by a member of his staff when returning the sword surrendered on that occasion. Remaining in Camp Chase and Fort Warren until 1862, he was exchanged and returned to Richmond, where he was commissioned a surgeon and assigned to duty with the 4th Virginia Infantry in the "Stonewall" Brigade. He served with this command for several months, but owing to ill health was relieved from field duty, ordered to Staunton and assigned to the charge of a general hospital. Here he developed the administrative talents for which he was afterwards conspicuous.

Returning to Winchester in 1865, he pursued private practice with unselfish devotion until the summer of 1874, when, after a long ride on a hot day, he was seized with a violent pain in his right eye, from which he suffered for several weeks. After rallying to some extent from his prostration he went to Baltimore and consulted Dr. Chisholm, who deemed an operation necessary and extirpated the eye, finding a small tumor on the optic nerve. He returned and in a short time was apparently restored to health.

A vacancy having occurred in the Western Lunatic Asylum by the death of its superintendent, Dr. Francis T. Stribling, it devolved upon the Board of Trustees to elect his successor. After due consideration the board decided to confide this important trust to Dr. Baldwin.

The last meeting of the association which he attended was in Washington, D. C., in 1878.

In the early part of 1879 his diseased eye required another operation, but he was not benefited, and it was apparent to his friends that he could survive but a few months. On the 14th of November, 1879, he was called to rest.

DR. JESSE P. BANCROFT.

The death of Dr. Jesse P. Bancroft occurred on the 30th day of April, 1891. His last illness dated from a paralytic attack in 1889, while presiding at a meeting of the New England Psychological Society. Although stricken with what he knew must be a serious if not fatal sickness, with heroic calmness and characteristic presence of mind he put the motion for the meeting to adjourn before he was removed to his hotel. He gradually rallied and, though unable to enter into active work, never for a moment until the day of his death did he lose his interest in passing events or in whatever transpired in the specialty he loved so well.

Dr. Jesse P. Bancroft was born in Gardner, Mass., April 17, 1815. Like many New England farmers' sons of that day, he felt a strong desire for a higher education, and not possessing the requisite means, was obliged to earn by teaching and other methods the necessary funds for a collegiate and professional education. The earnestness of purpose and character thus developed by his early struggle was reflected through his later life. He fitted for college at Andover, Mass., entered Dartmouth College in 1837, and graduated in 1841. He studied medicine with the late Professor E. R. Peaslee, of New York, and graduated from the Dartmouth Medical School in 1844. Prior to his medical graduation he was demonstrator of anatomy in Brunswick Medical School. In 1845 he commenced the practice of medicine in St. Johnsbury, Vt. He soon developed a large general and consultation practice, and during the 12 years he remained there acquired an extensive reputation as a practitioner and a high character in the community.

A growing interest in psychological study led him to look with favor upon a call made to him by the trustees of the New Hampshire Asylum to become superintendent and treasurer of that institution. On July 15, 1857, after much reflection and against the importunities of his numerous friends and patients in

St. Johnsbury, he gave up general practice and, accepting the position offered him, entered upon the special study and practice of psychological medicine.

Dr. Bancroft's subsequent life is practically identified with the history of the New Hampshire Asylum, with its early struggle and final success, and with better methods in the care and treatment of insanity in which he acquired not only local but national reputation. When Dr. Bancroft came to New Hampshire he found a general indifference to the cause of the insane, as well as a woeful lack of funds with which to develop the institution and supply proper treatment for the patients committed to his care. He found, too, buildings constructed on the old rectilinear plan, admitting of little classification of the different classes of patients, poorly lighted and with imperfect ventilation and plumbing.

During the last few years of his life Dr. Bancroft took great interest in state supervision of the insane. For years he had been painfully aware of the fact that the state took little real interest in the condition and needs of its poor insane. He was among the first of asylum superintendents to join the National Conference of Charities. In 1880 he was appointed chairman of a committee and drew up a report containing many important suggestions on the treatment of insanity, which was signed by many men who had previously held divergent views. He labored strenuously to establish state supervision in his own state, and he lived long enough to see a state board of lunacy in successful operation, rendering infinite good to many unfortunate people who had the misfortune to have insanity added to poverty.

Personally Dr. Bancroft was universally admired. In his own city his opinion was frequently solicited, and he held at various times positions of trust in the banking, charitable and educational institutions of the place. He was a religious man, positive in his own convictions, but always charitable towards the views of others who might differ from him. The same simple, just and sympathetic qualities that made Dr. Bancroft a valued counsellor in public and private affairs throughout the state greatly endeared him to his intimate acquaintances and his own family.

For several years Dr. Bancroft was lecturer on mental disease in the Dartmouth Medical School, and at the time of his last ill-

ness was a member of the New Hampshire Medical Society, of the Association of Medical Superintendents of Institutions for the Insane, and president of the New England Psychological Society.

DR. RANDOLPH BARKSDALE.¹

Dr. Randolph Barksdale retired from the superintendency of the Central State Hospital, Petersburg, Va., November 1, 1896, because of failing health. On account of the excellent work he had done at the hospital and in the interest of the insane of the state generally, and the personal esteem in which he was held by all, he was, at the request of the writer, appointed by the Board of Trustees superintendent emeritus and consulting physician on a salary. For nearly three years he paid frequent visits to the hospital and was of valuable assistance. On October 18, 1907, after a long period of impaired physical health, he died at his home in Petersburg, at the age of 76, leaving a spotless name as a heritage to posterity. Dr. Barksdale was descended from one of Virginia's most prominent, cultured and influential families. His academic education was acquired at local schools and at the University of Virginia. After graduating in medicine at the university in 1849, he entered the medical department of the University of Pennsylvania, and took his degree there two years later. He was then appointed on the resident staff of Blockley Hospital. At the expiration of his service there he went abroad, and completed his medical education in Paris. In 1856 he located at Richmond, Va., where he practiced his profession with success till the beginning of hostilities between the states. Entering the Provisional Army of the Confederate States as a surgeon, he began actual service at Manassas and continued till the surrender at Appomattox. In 1862 he became medical inspector of Longstreet's Corps and held the position until the close of the war.

From 1873 to 1896, excepting two years (1882-1884), when he was a member of the medical staff of the Catonsville, Md., Hospital, he was the superintendent of the Central State Hospital at Petersburg. He was twice married, his first wife being Miss Macfarland, of Richmond, by whom he had three children. His

¹ By Dr. William Francis Drewry of Petersburg, Va.

second wife was Miss Patteson, of Petersburg. When he retired from the service of the hospital he carried with him the respect and regard of the public and the gratitude and high esteem of those who had been associated with him. I count myself fortunate indeed to have had the advantage of ten years' training under and association with a man of such exalted character, such keen sense of justice and tender sympathy, and, withal, such superior ability. Though he wrote little for the medical press, and his retiring disposition was a barrier to prominence in medical societies, he was justly regarded as one of the ablest alienists and hospital superintendents of his state and of the South. His personality was distinctive. Of lofty ideals and dignified bearing, reserved and retiring, unostentatious and unobtrusive, yet firm in conviction, loyal in friendship, kind and considerate, courteous and gentle always, he was respected and beloved.

DR. JAMES BATES.

Dr. James Bates, of Yarmouth, Me., was born September 24, 1789, at Greene, Me. He graduated from the Harvard Medical School in March, 1813, and in the same year was appointed surgeon's mate in the war of 1812. After the war he practiced for two or three years at Hallowell, Me., when he removed to Norridgewock, Me., where he remained in extensive practice until 1845, at which time he was appointed superintendent of the Maine Insane Asylum, holding the position for about six years, or until the asylum had been destroyed by fire. In 1858 he removed to Yarmouth and continued in medical practice there until the age of 90 years, in full possession of his mental faculties. He was not an author, though he frequently lectured, in and out of his native state, on agriculture, stock raising and kindred topics, and also on temperance from a medical and physiological standpoint. In 1830 he was elected to the House of Representatives, representing the Second Congressional district of Maine in the 22d Congress. He served two years as surgeon's mate in the war of 1812, and in 1839 he was appointed hospital surgeon in the "Aroostook War," growing out of the settlement of the northeastern boundary of Maine.

He died February 25, 1882, in his 93d year.

DR. JOHN ALFRED BEAUCHAMP.

John Alfred Beauchamp, M. D., was born at Edmonton, Ky., November 24, 1835, and died at the Central Hospital for Insane, near Nashville, Tenn., February 27, 1910. He was a maternal grandson of Edmund Rogers, a soldier of the Revolution; a kinsman of George Rogers Clark; his great-uncle was a member of the Cincinnati; he was a nephew and office pupil of Dr. Chas. K. Winston, an able and gifted professor of materia medica and therapeutics in the medical department of the University of Nashville, and, through his father, Dr. J. W. Beauchamp, he traced his lineage back in a direct line to Warwick, the maker of kings.

His literary education was completed at Center College, Danville, Ky. Matriculating at the medical department of the University of Nashville, he received the degree of doctor of medicine in the class of 1861.

In the Civil War he entered the Confederate service as a member of Bledsoe's battery of artillery, but was soon transferred to the medical staff of the Confederate States Army, and served with credit and honor to the close of the war.

Shortly thereafter he was appointed assistant to Dr. W. P. Jones, superintendent of the Central Hospital for the Insane of Tennessee. At the resignation of Dr. Jones, two years later, by reason of ill health, he was retained as assistant to Dr. John H. Callender, and continued in this position for 25 years; on the resignation of Dr. Callender, December 19, 1894, he was appointed superintendent of the Central Hospital, and faithfully and satisfactorily discharged his important and responsible duties until death, being an efficient, earnest and sincere official of the State of Tennessee for over 40 years. During his service two large additions were made to the Central Hospital, greatly increasing its scope and capacity and adding largely to his duties and responsibilities.

Of manly and robust physique, with frank and open countenance, he was modest, kindly, genial and courteous; of quiet voice and manner, cool, collected and placid of temperament, he was admirably fitted for his arduous and trying duties.

DR. THEODRIC ROMEYN BECK.

Theodric Romeyn Beck, alienist, was born at Schenectady, N. Y., August 11, 1791. His mother, a daughter of the Rev. Derick Romeyn, principal of the Schenectady Academy, was a woman of rare attainments and great force of character.

Theodric Romeyn Beck entered Union College in 1803, graduated in 1807 at the age of 16, and at Albany began the study of medicine under Drs. Low and McClelland. Shortly afterwards he entered the College of Physicians and Surgeons, New York, receiving there his medical degree in 1811, and thence returning to Albany to practice. He was, however, by reason of too great sympathy with the sick, not so highly successful in practice as in authorship, hence at the end of six years he gave up practice entirely.

In 1815 he was appointed professor of the institutes of medicine and lecturer on medical jurisprudence in the College of Physicians and Surgeons for the Western District at Fairfield, N. Y., and in 1817 became principal of the Albany Academy, afterwards, in 1826, lecturer on jurisprudence in Albany Medical College, occasionally holding both the chair of practice and that of *materia medica* in the same institution.

The year 1829 saw him president of the New York State Medical Society, an honor held for three successive years; in 1840 he held the professorship of *materia medica* in the Albany Medical College; in 1842 he became one of the managers of the New York State Lunatic Asylum, at Utica; in 1854, its president. After the death of Dr. Brigham the *American Journal of Insanity* was edited by him for several years, and he was also a copious contributor to medical journals, chiefly on insanity.

His most celebrated book was his "Elements of Medical Jurisprudence," a monumental work, which appeared in 1823. It attracted much attention and has not ceased to be an authority both at home and in Europe. An English edition appeared in 1825, two years after the first American edition, and by the time of the author's decease, four English, one German and five American editions had been issued. Since the author's death, another American, and even a Swedish, edition have been published. Traill, the Scotch legal physician, called it "the best work on the

general subject which has appeared in the English language." Guy "acknowledges his obligations in a special manner to Beck's learned and elaborate 'Elements of Medical Jurisprudence'"; and at the present day Prof. Rudolph A. Witthaus declares this scientific classic to be "*facile princeps* among English works on legal medicine . . . as admirable for scholarly elegance of diction as for profound scientific research."

Dr. Beck was a man of massive build, dark of skin, hair and eye. He possessed an extremely gentle and sympathetic manner.

He was a voluminous reader of scientific publications, history, poetry, fiction, and, in fact, of every sort and variety of literature that was sound, sensible, and interesting.

He was an earnest and active Christian, nor did his ardent faith forsake him during a long and painful illness, ending in his death on November 19, 1855, at the age of 64.

DR. BROOKS FORD BEEBE.

Dr. Brooks Ford Beebe was born June 25, 1850, at Barlow, Washington County, Ohio, and died at Cincinnati, May 29, 1914. His end came suddenly from cerebral hemorrhage while he was actively engaged at his city office.

His boyhood was spent in rural or semi-rural districts, where he obtained the usual primary schooling of those days. Coming to Cincinnati in the later seventies, he matriculated at the Medical College of Ohio, now the Medical Department of the University of Cincinnati, where he graduated with honor in 1880, securing an internship in the Hospital of the Good Samaritan. For nine years, from 1881 to 1890, he was assistant acting surgeon to the U. S. Marine Hospital at Cincinnati. Shortly after entering private practice in 1890 he developed a taste for medico-legal work, especially in connection with psychiatry, and his services were in frequent demand by the courts and the legal profession.

In 1900 he established the private sanitarium for nervous and mental disorders known as "Grandview," located on Price Hill, Cincinnati, and was its medical superintendent and proprietor at the time of his death.

Although not a voluminous writer, his contributions to medical literature were timely and practical in character and bore evidence

of much thoughtful preparation. He was a member of the Academy of Medicine of Cincinnati from his earliest years in practice, and was influential in reorganizing the Ohio State Medical Association. He was president in 1907 of the Ohio Valley Medical Association, and a member of the American Medical Association, and of the American Medico-Psychological Association from 1909 until his death.

DR. LUTHER VOSE BELL.

Luther Vose Bell was born December 30, 1806, a son of Samuel Bell, who filled the offices of Chief Justice of New Hampshire, Governor and United States Senator; he was descended from Scotch-Irish stock which had settled in the town of Londonderry.

When 12 years of age he entered Bowdoin College and graduated in 1823, receiving his medical degree at Dartmouth College in 1826, and afterwards pursuing his medical studies in Europe. The degree of LL. D. was conferred upon him by Kings College, Nova Scotia, in 1844, and by Amherst College in 1855.

He practiced in the towns of Brunswick and Derry, N. H., and in 1834 he gained the Boylston prize for a dissertation on "The Dietetic Regimen Best Fitted for the Inhabitants of New England," and in the following year published an essay on the "External Exploration of Diseases" (Library of Practical Medicine, Vol. ix). He subsequently issued a small volume entitled "An Attempt to Investigate Some Obscure and Undecided Doctrines in Relation to Small-Pox and Variolaform Diseases."

About this time, influenced by the success that had attended the establishment of the State Lunatic Hospital at Worcester, Mass., in order to improve the condition of the insane in New Hampshire he entered political life as a member of the general court and began a propaganda which led eventually to the establishment of the New Hampshire Asylum for the Insane. While pressing this object at a session of the Legislature he was appointed, late in 1836, physician and superintendent of the McLean Asylum for the Insane, at Somerville, near Boston.

In 1845, yielding to the solicitation of the trustees of the Butler Hospital, at Providence, R. I., then in contemplation, the trustees of the Massachusetts General Hospital gave him leave of absence

to visit hospitals and asylums in Europe to prepare a plan which should embody the best-known construction of that period.

He was one of the founders, in 1844, of the Association of Medical Superintendents of American Institutions for the Insane, now the American Medico-Psychological Association. At a meeting of the Association held in May, 1849, he read a paper "on a form of disease resembling some advanced stages of mania and fever, but so contradistinguished from any ordinarily observed or described combination of symptoms as to render it probable that it may be an overlooked and hitherto unrecorded malady." This is the malady to which his own name has been given as "Bell's Disease," which others have called typhomania, and upon his descriptions and study of which much of his fame as an alienist rests.

He was frequently called as an expert in insanity in the courts. In 1850 he became a member of the Executive Council of Gov. Briggs for one year. While acting in this capacity he passed upon the famous case of Prof. Webster, of Harvard University, who had been convicted of the murder of Dr. George Parkman.

In 1856 he resigned the superintendency of the McLean Asylum, on account of ill health, to retire to private life in Charlestown, Mass., but on the outbreak of the Civil War he offered his services to the government; enlisted as surgeon with the 11th Regiment of Massachusetts Volunteers, but soon was promoted to the position of brigade surgeon to Gen. Hooker's division on the lower Potomac. He died in camp at Budd's Ferry.

It has been said of Luther Vose Bell that nature was lavish to him in physical as well as in mental gifts. He was much above the common stature, and the grace of his carriage was perhaps heightened by a certain negligence in his dress.

DR. JOHN MERRICK BEMIS.¹

After an illness of about one year Dr. John Merrick Bemis died on September 22, 1915. He had not been in good health for several years, but was able to attend to a large part of his professional duties until within a few months of his death.

¹ By Dr. Walter A. Haviland.

Dr. Bemis was born February 14, 1860, at the Worcester Insane Asylum, where his father, the late Dr. Merrick Bemis, was superintendent. Born in an institution for the insane, his father before him a psychiatrist, Dr. Bemis spent all his life in the study and care of the insane. To us who knew him best his was an ideal character for this work. His personality was largely made up of patience, kind-heartedness and real sympathy. All of this he brought to his work.

He received his preliminary education in the Worcester public schools and at Phillips-Andover Academy. He entered the Harvard Medical School, but was unable to complete his studies there on account of ill health. Later, on regaining his health, he went to the University of Vermont, where he received his degree of M. D. in 1893. He then returned to Worcester, where he assisted his father at the Herbert Hall Hospital until the death of the latter in 1904. He then succeeded to the superintendency of the hospital, a position he filled for the remainder of his life. A high tribute was paid to his kindly nature by the genuine grief expressed by his old employees at the time of his death.

Dr. Bemis was for several years a trustee of the Baldwinsville Hospital Cottages for Children. He was a member of the American Medical Association, the Worcester District Medical Society, the American Medico-Psychological Association and the New England Society of Psychiatry.

DR. MERRICK BEMIS.

Dr. Merrick Bemis died at his residence in Worcester, Mass., on the 3d of October, 1904.

Dr. Bemis was born in Sturbridge, Mass., May 4, 1820. When he was a child his parents removed to Charlton and later to Brookfield. He was brought up on a farm and enjoyed only the educational advantages of the ordinary country school. By much personal effort he completed a course of study at Dudley Academy, and later, after teaching school to secure funds, entered Amherst Academy to fit himself for Amherst College. A long and severe illness compelled him to change his plans. After teaching for several years at Brookfield, he began the study of medicine in Boston at 25 years of age. During the winter months



DR. J. B. ANDREWS.



DR. RANDOLPH BARKSDALE.



DR. MERRICK BEMIS.



DR. H. A. BUTTOLPH.

he taught school to secure the money to prosecute his medical studies. He attended medical lectures at Pittsfield, Mass., and at Castleton, Vt., and graduated from the latter institution in 1848. In November of the same year he accepted a temporary service as assistant physician in the State Lunatic Hospital at Worcester. He soon received a regular appointment upon the medical staff under Dr. George Chandler, the superintendent, and occupied this position for eight years. Upon the resignation of Dr. Chandler in 1855 he was elected superintendent. The following eight months he devoted to travel and study in Europe, taking charge of the hospital upon his return in the summer of 1856. For 17 years he was superintendent of the Worcester Hospital, resigning in 1872. During his administration he introduced many important changes in the methods of treating and caring for the insane and maintained a high standard for his institution. During the latter part of his hospital service he purchased the property to which the Worcester Hospital was later removed, and submitted plans for the erection of new buildings. In 1868 he again visited Europe to study hospitals and their methods. After a full quarter century of continuous service in the State Hospital, he resigned to establish at Worcester, Herbert Hall, a private asylum for the care and treatment of women suffering from mental and nervous disease. Here he conducted a successful private institution until his death. During the last few years of his life his son, Dr. John M. Bemis, was associated with him in its management. In addition to the work of this private hospital he had an extensive practice as an insanity expert both in consultation and in the courts.

He was one of the first American physicians to advocate cottage hospitals. In 1887 he was appointed as one of the state trustees of the Hospital Cottages for Children at Baldwinville, and served as president of the corporation.

He possessed a fine literary taste and accumulated a valuable library, the enjoyment of which did much to give pleasure and comfort to his declining years.

He married Caroline A. Gilmor, January 1, 1856, the daughter of a Brookfield physician.

DR. NATHAN D. BENEDICT.

Dr. Nathan D. Benedict was born in Otsego County, N. Y., on April 7, 1815. He graduated with honor in 1837 at Rutgers College, New Brunswick, N. J., and commenced the study of medicine immediately afterwards at the University of Pennsylvania in the spring of 1841. After graduating he began to practice in Philadelphia, and was successfully pursuing his profession when he was appointed medical superintendent of the Philadelphia Almshouse in 1846. He gave himself with earnest devotion to the care of the insane, and at the same time paid attention to the heating and ventilation of the portion of the institution set apart for the insane. He was chosen superintendent of the State Lunatic Asylum at Utica, N. Y., in the fall of 1849. While engaged in directing necessary alterations in the heating and ventilation of this building upon a plan which he had originated and urged upon the managers, he was attacked with pneumonia, attended by profuse hemorrhages, and was long at the point of death. When able to go out after months of confinement he was recommended to spend the winter of 1853-4 in Florida. Returning in the spring of 1854 with the expectation of engaging in his work at the asylum, he found it necessary to resign the superintendency, which he did with great reluctance, for his heart was in the work. He removed to Florida in the fall of 1855 and opened an institution for invalids at Magnolia. In this enterprise he succeeded well until the breaking out of the Civil War, which virtually compelled him to give up his plans, as the government seized his buildings for hospital purposes. He removed to St. Augustine, where he continued to reside for the rest of his life, and where he filled several offices of honor and trust.

He died on April 30, 1871. Calm, self-possessed, and genial, he had a special adaptability to the care of the insane, which he entered upon and carried forward with a force and energy springing from deep convictions and beneficent impulses too great for his physical constitution.

DR. HARVEY BLACK.

Harvey Black, M. D., superintendent of the Southwestern Lunatic Asylum, Marion, Va., died at St. Luke's Home, Richmond, Va., October 19, 1888.

He was born at Blacksburg, Montgomery County, Va., August 27, 1827. As a farmer's son, he acquired a common school education, and at the age of 18 began the study of medicine. At the age of 20 years he served as soldier and hospital steward in the Mexican War. He graduated in medicine in 1849 from the University of Virginia at the close of his first session, and began to practice his profession in Blacksburg. At the beginning of the Civil War he became surgeon of the 4th Virginia Regiment of Infantry, under his old Mexican War captain. This regiment formed a part of the renowned "Stonewall" Brigade, and in the capacity of surgeon he formed the friendship of General T. J. Jackson. The war ended, Dr. Black resumed private practice at Blacksburg, and when the government appropriations for the establishment of agricultural and mechanical colleges in various states were made, he became interested in locating one in his native town, and was made rector of its board of directors.

In 1872 he became president of the Virginia State Medical Society, and November 19, 1875, was appointed superintendent of the Eastern Lunatic Asylum, at Williamsburg, Va., entering upon his duties January 1, 1876.

He possessed administrative ability in a remarkable degree, but at the date of his appointment was without experience as an alienist. In March, 1882, owing to political changes he was removed from office and retired to private life.

In 1884 he was appointed one of a commission to select a site for a new institution for the white insane in Southwestern Virginia. In 1885, although in poor health, he was elected a member of the General Assembly. In May, 1887, the Southwestern Lunatic Asylum was opened for the reception of patients, and Dr. Black was made its first superintendent. He was then a sufferer from urinary calculus, and in October, 1887, underwent an operation for its removal. He returned to his work in the spring of 1888, and remained faithfully at his post until October 5. His last annual report was written almost entirely in bed. On October 8 he had a second operation for calculus, from which he never rallied.

DR. I. W. BLACKBURN.

Isaac Wright Blackburn, M. D., was born in Bedford County, Pa., May 27, 1851, and died June 18, 1911. The families of his parents were of English descent, and had emigrated to this country during the 17th century. They were among the early settlers of Pennsylvania and were of Quaker stock.

Dr. Blackburn received his early education in the public schools, supplemented by private instruction. In 1872 he began the study of painting, in order to become a portrait painter, and became a pupil in the private school of Prof. C. Schussele, principal of the Pennsylvania Academy of Fine Arts. Subsequently he became a student at the academy under Schussele, Eakins and Baily. While pursuing his art studies he attended the lectures and demonstrations of Prof. W. W. Keen on artistic anatomy, and becoming deeply interested in anatomy, he decided to study medicine. He entered the office of a preceptor, S. F. Lytle, M. D., of Philadelphia, and remained under his instruction while preparing to enter the University of Pennsylvania. This instruction and study in the Auxiliary Department of Medicine in the University of Pennsylvania prepared him to enter the Medical School of the University in 1879. In 1882 he graduated with honors and received the Morbid Anatomy Prize, offered by Prof. Tyson for his thesis on the "Microscopic Diagnosis of Lymphoid Structures." Deciding to adapt the branch of pathology as his life work in medicine, he remained two years for a post-graduate course in pathology under Dr. Henry F. Formad, demonstrator of pathology in the University of Pennsylvania.

On July 1, 1884, he was appointed special pathologist to the Government Hospital for the Insane, Washington, D. C. In 1885 he was appointed to the position of lecturer on the pathology of mental diseases in the Medical School of the Georgetown University, and in 1886 was given the chair of pathology. In 1889 the laboratory work and lectures on histology were given in charge of Dr. Blackburn were added to the chair of pathology. In 1898, owing to increased work, the chair was divided, and Dr. Blackburn was elected professor of morbid anatomy and special pathology, which position in the school he occupied at the time of his death. In 1906 he was given the chair of morbid anatomy

in the Medical Department of the Georgetown University of Washington, D. C.

Dr. Blackburn was a member of the American Medico-Psychological Association, the American Association for the Advancement of Science, Philadelphia Pathological Society, and other medical and scientific societies.

DR. BENJAMIN BLACKFORD.

Dr. Blackford was a Virginian by birth, a Southern gentleman of the old regime, descended from one of the honored families of his native state. He was reared and educated amidst refining influences. He began his medical studies at the University of Virginia, and completed them at Jefferson Medical College, Philadelphia, Pa., in 1855. Immediately after graduating he became resident physician at Blockley Hospital, and held the position acceptably for two years. Returning home, he located in Lynchburg, and practiced his profession until the Civil War, when he was appointed surgeon to the 11th Virginia Regiment of the Confederate Army. Soon showing marked executive ability, he was appointed surgeon-in-charge of the military hospital at Culpeper, and later transferred to other hospitals in the state. He remained in the service until the surrender at Appomattox.

After the close of the war he resumed general practice at Lynchburg, where he remained till he was appointed superintendent of the Western State Hospital, at Staunton. He held prominent positions in the state and local medical societies, being president of the State Society in 1888.

He was a frequent contributor to medical journals and newspapers. His style of writing was clear and ornate. His annual reports, which were always written in an easy, attractive manner, contained many valuable suggestions regarding the care of the insane and the management of state institutions.

In 1889 he was appointed superintendent of the state hospital at Staunton, and at once instituted an improved system of management; many improvements were made in matters material, administrative, and medical. With honesty of purpose and a clear insight into the needs of the insane, he met the daily problems which confronted him and administered the affairs of the institution faithfully and intelligently. He died in 1905 at the age of 71 years.

DR. CHAUNCEY BOOTH.

Dr. Chauncey Booth was born in Coventry, Conn., September 21, 1816. He entered Amherst College with the class of 1837, but remained only two years; taught school for two years, and in the spring of 1837 went to the Brattleboro Asylum for the Insane in Vermont to be assistant to his uncle, Dr. William H. Rockwell, who had opened the institution the previous December. He remained in Brattleboro for three years, studying medicine meanwhile at Pittsfield, Mass., and receiving the degree of M. D. from the Berkshire Medical School in 1839. At the opening of the Maine asylum at Augusta in September, 1840, he was appointed assistant physician and held that office for three years, forming a particularly close and intimate friendship with Dr. Isaac Ray, then superintendent, which continued till his death. In 1843 Dr. Booth received the appointment of assistant physician at McLean Asylum, and in this position was associated for 13 years with Dr. Bell, who speaks of him as his "witty, companionable, generous second-in-command." One of his colleagues said of Dr. Booth: "He was a man of sterling worth, and most esteemed by those who knew him best. He was quiet and modest, but resolute and self-possessed." His principal characteristics were his keen and racy humor, his modesty and generosity, and his wonderfully sympathetic insight into the moods of the patients, by whom he was much beloved.

DR. AMARIAH BRIGHAM.

Amariah Brigham, M. D., was born in New Marlborough, Berkshire County, Mass., December 26, 1798. His father, John Brigham, was a native of the town, a farmer and a descendant of Thomas Brigham, who came from England and settled in Cambridge in 1640.

Amariah, at 11 years of age, upon the death of his father, was adopted by his uncle, Dr. Origin Brigham, of Schoharie, N. Y., who planned to educate him for the medical profession. Soon, however, he was thrown again upon his own resources by the death of this uncle, and at the age of 14 secured employment as clerk in a book store in Albany, where he had access to books, with leisure to read them. After three years he returned to his

mother's home in New Marlborough, where he spent three years in fitting himself for the medical profession, and afterwards had a year in New York in attendance at medical lectures. During this period he taught school through the winter months, and it is said that as he had never studied English grammar, in order to teach it he mastered the subject in a single day. He was also a medical student with Dr. E. C. Peet, of New Marlborough, and in 1820 with Dr. Plumb, of Canaan, Conn. In 1821 he established himself in Enfield, Mass., where he remained for two years, removing thence to Greenfield, where some seven years' practice enabled him to spend a year in travel and study in Europe.

Upon his return in 1829 he selected Hartford, Conn., as a more prominent and lucrative field for his labors, and settled there in April, 1831. His early residence in Hartford was marked by a controversy in which, in his solicitude for the mental and physical health of his associates, he opposed the custom of revivals and protracted religious meetings, and brought upon himself a charge of scepticism and infidelity. He published later two small volumes entitled "Influence of Mental Cultivation on Health" (1832) and "Influence of Religion on the Health and Physical Welfare of Mankind" (1836).

About this time, when Asiatic cholera made its first appearance in America, after a careful study of the disease he published a treatise on "Epidemic Cholera."

In the year 1840 he wrote another work entitled "An Inquiry Concerning the Diseases and Functions of the Brain, the Spinal Cord and the Nerves," and in the same year became a candidate for the office of superintendent of the Retreat for the Insane at Hartford, but owing to his stand against undue religious enthusiasm and his strong political views, his candidacy was opposed, but the appointment was finally made.

He married, in 1835, Susan C. Root, a daughter of Spencer Root, of Greenfield, Mass. They had four children, one son and three daughters.

In 1842 he accepted the superintendency of the New York State Lunatic Asylum at Utica, opened in January, 1843, which he labored to make a model institution and to persuade the public that it had curative rather than custodial purposes. To this end he sought to diffuse a more extended knowledge of mental dis-

eases through the medium of his annual reports and popular lectures. For the same purpose in 1844 he undertook the publication and editorship of the *American Journal of Insanity*, at that time the only magazine of its kind.

Dr. Brigham kept a journal relating to his health, and it is noted that dating from 1845 his condition caused him some uneasiness. In February, 1848, he gave up his work temporarily and spent two months in travel in the Southern States. The benefits derived were soon offset by his great sorrow at the death of his son in August, 1848, an affliction followed in a few months by the death of his mother. The following year was a constant struggle against ill health, and in August he had an attack of dysentery, to which he succumbed on September 8, 1849.

The Utica State Hospital is an enduring monument of his ability as an organizer, and his annual reports and editorial writings in the *Journal of Insanity* bear witness to his professional fitness for his pioneer service in New York. His most prominent characteristic was a benevolent interest in his fellowmen. His self-reliance and strong determination were traits which served equally to advance his own beneficent ambitions and the welfare of the afflicted in his care. In no respect covetous of personal popularity, he was governed in his acts by conscience rather than by considerations of human approval.

DR. DANIEL ROBERTS BROWER.

Dr. Daniel Roberts Brower died at his home in Chicago, March 1, 1909, from cerebral hemorrhage, aged 69. He was born in Philadelphia and graduated from the Philadelphia Polytechnic College in 1860 with the degree of M. S., and from the Medical Department of Georgetown University in 1864. He served as an assistant surgeon for two years during the Civil War, and afterwards as superintendent of the Freedmans Hospital, Richmond, Va., and later of the Eastern State Hospital for the Insane, Williamsburg, Va., for nine years. He came to Chicago, Ill., in 1875, and soon became an important figure in the medical life of the city. He was connected with Rush Medical College, first as professor of materia medica and therapeutics, and later as professor of nervous and mental diseases, and later held for many

years the chair of diseases of the nervous system in the Woman's Medical School and the Post-Graduate Medical School.

He was a member of the American Medical Association, the American Neurological Association, the American Electro-Therapeutic Association, the National Association for the Study of Epilepsy, the Mississippi Valley Medical Association, the Chicago Physicians' Club and the American Medico-Psychological Association, an honorary member of the Moscow Society of Neurologists and Psychiatrists, and one of the founders of the Senn Club. He was a member of the attending staff of St. Joseph's, Cook County and Presbyterian hospitals, and consulting physician to the Women's and Children's Hospital and Oakwood Sanitarium.

He was the author of a text-book on insanity, and of many monographs on nervous and mental diseases. He received the honorary degree of A. M. from Wabash College, and of LL. D. from Georgetown University, Kenyon College and St. Ignatius College.

He was in apparently good health until a week before his death, when he was seized with cerebral apoplexy, causing paralysis of the left side, but apparently not affecting his mind. He gradually failed physically, but retained consciousness until a few hours before his death.

DR. D. TILDEN BROWN.

Dr. D. Tilden Brown was born in Boston, Mass., in August, 1822. In 1828 his parents removed to New York City, which became his home for the greater part of his life. His education was acquired at a school in Poughkeepsie and at the Washington Institute. He studied medicine in the office of Dr. Willard Parker, and graduated at the College of Physicians and Surgeons in 1844. When 22 years of age he became the senior medical officer of the City Asylum on Blackwell's Island, under the general superintendency of Dr. McClelland, of Bellevue Hospital. For a single year he was medical assistant at the Vermont Asylum and for a like period at the Utica State Asylum, which latter position he resigned to engage in practice with Dr. Parker.

The health of Dr. Brown compelled him to relinquish the general practice of medicine and he became the agent of those

who were opening a route across Central America for emigrants to California, in 1849. By his familiarity with Spanish, he was brought into direct relations with the authorities. He explored several routes which have since become well known, and ultimately negotiated the first treaty which secured the right of transit across the Isthmus of Nicaragua. His efforts brought fortunes to others, but not to himself.

In June, 1852, he assumed the charge of Bloomingdale Asylum, made vacant by the resignation of Dr. Nichols. Dr. Nichols was the successor of Dr. Brown at Utica, and his predecessor and successor at Bloomingdale.

He visited Europe at the request of the trustees of the Sheppard Asylum at Baltimore and prepared the plan which was finally adopted.

He resigned his position at Bloomingdale in January, 1877, in consequence of ill health and went abroad for treatment. He returned later, but never resumed hospital work, and died in 1890.

DR. JOHN PEASLEE BROWN.

Dr. Brown was born in Raymond, N. H., October 12, 1833, and died September 19, 1908. He came of Colonial stock, the first representative of which settled in New Hampshire in 1639.

He was the son of a farmer and one of eight children. The family farm was small and provided only necessities, not luxuries. In his struggle to get an education, as his father was not able to pay his expenses he maintained himself while at school by farm work during the summer and teaching during the winter, through his preparatory and collegiate courses.

He graduated from Dartmouth College in 1860, and afterwards went to Louisiana as a tutor in a private family, but the speedy breaking out of the war compelled him to return to the North. He then took up the study of medicine and graduated from the Harvard School of Medicine in 1865.

Shortly afterwards he became assistant physician in the New Hampshire State Hospital under the superintendency of Dr. J. P. Bancroft. In the same year he married Caroline E. Stevens, of Mt. Vernon, N. H.

Dr. C. P. Bancroft, the present superintendent and a life-long friend of Dr. Brown, wrote thus of his career in the New Hampshire State Hospital :

Dr. Brown came to the State Hospital in April, 1865, and served continuously until March 1, 1878, when he resigned to accept the superintendency of the Taunton Hospital. During the time he was here he was an assistant superintendent; and once during that period for nearly a year, while Dr. J. P. Bancroft was absent in Europe, he acted as superintendent. Dr. Brown made an enduring reputation for himself in New Hampshire, in a quiet and unostentatious way, by simply performing most efficiently the duties which fell upon him. His patients became greatly attached to him, and long after his resignation his memory lingered with those to whom he had ministered. Among patients and employees he had the reputation of being an eminently just and sincere man, and all came to know that under his quiet, almost reserved manner there beat a warm and sympathetic heart.

In 1878 he became superintendent of the Taunton State Hospital, and held this office more than 20 years.

The senior Dr. Bancroft entertained for him the most profound regard. In the report of the New Hampshire State Hospital in May, 1878, the superintendent says that " Dr. Brown left with an established reputation earned by genial culture, extensive information and ample experience."

During the last two or three years of his service he was in delicate health and was confined to his room frequently for many weeks. The sudden death of his wife in 1906 was a severe blow from which he never recovered, and soon afterwards he retired from the hospital.

The trustees of the Taunton State Hospital in accepting his resignation put on record the following as to his character :

The utmost confidence has existed between Dr. Brown and the trustees from the beginning to the end of his administration. His ripe judgment, quick insight into the growing needs of the hospital insane and adoption of the most approved means of developing the institution to meet them, as well as his native talent for quiet, effective organization and management, soon established his rank as a hospital administrator of the first order, which he has maintained to the close of an unusually long official career. His equable and cheerful nature, calmness and patience, firmness and gentleness have been reflected in his influence in dealing with the patients; and he brought to the work not only the highest professional skill, but a sympathy and tenderness of heart which enabled him to do everything that was possible for their comfort and the amelioration of their sufferings in mind and body. His thoughtfulness and consideration have always made the work of the trustees a pleasant and agreeable duty.

DR. PETER BRYCE.

Dr. Peter Bryce, the first superintendent of the Alabama Insane Hospital, at Tuscaloosa, died at his residence there on August 14, 1892. He was born at Columbia, S. C., March 5, 1834, and received his education at the South Carolina Military Academy, where he graduated with a high grade of scholarship. Upon completing his academic studies he entered upon preparation for the medical profession. In 1859 he graduated in the Medical Department of the University of New York. After receiving his diploma he further pursued his studies in Europe, especially in the hospitals of Paris.

Upon returning to America he was connected with the State Insane Hospital of South Carolina, and afterwards for a short time was an assistant physician at the State Hospital at Trenton, N. J.

From this latter position he was called, in 1860, by the first board of trustees to become medical superintendent of the Alabama Insane Hospital, the corner-stone of which had been laid with imposing ceremonies seven years before, but which had only been partially completed, with a capacity of only about one-third its present number of inmates.

At the time of his death he was president of the American Medico-Psychological Association and first vice-president of the Medico-Legal Society of New York. He had also been president of the Alabama Historical Society and of the Medical Association of Alabama. At the time of his death he was president of the Commission of Lunacy established by the Alabama General Assembly about five years before to provide for the custody and trial of the criminal insane, and also a member of the Alabama State Board of Health and of the Board of Censors. About ten years ago the University of Alabama conferred on him the degree of LL. D.

As a writer he was graceful, lucid and pleasing rather than vigorous in style; and in discussion he was ready of speech, persuasive in manner and always entertaining. He contributed occasional articles to the medical and scientific magazines and to the medico-legal journals of the country which attracted widespread attention and discussion. His annual reports as superin-

tendent of his own hospital, extending through more than a quarter of a century, were models of style and conspicuous examples of professional learning and expert knowledge of psychological medicine.

On July 15 he dictated a letter by the hand of his devoted wife to a life-long friend, in which he spoke of his rapidly declining strength and of his approaching end. He then wrote as follows, upon the oldest of all subjects, which is ever fresh :

If, as I apprehend, I am approaching the close of life rapidly, I have every reason to be thankful that its course is so smooth and pleasant. Death has never had any terrors for me, especially of late years. I feel that I have done my work, and hope, without self-praise, to be permitted to say I have done it well.

DR. DWIGHT R. BURRELL.

Dr. Dwight R. Burrell was born at Sheffield, Lorraine County, Ohio, March 1, 1843. He spent his boyhood on a farm, and after preparation in the common schools entered Oberlin College, where he graduated in 1866. His college course was interrupted by a brief service in Company K, 150th Ohio Volunteers, during the Civil War.

He received the degree of M. D. at Michigan University in 1868, and afterwards became an assistant physician in the New York City Asylum on Blackwell's Island. A year later he was appointed an assistant physician at Bloomingdale Asylum, where he remained several years. In 1876 he became resident physician at Brigham Hall, Canandaigua, N. Y., where he remained until incapacitated by illness in 1908.

His professional life of 40 years was devoted entirely to the treatment of the insane and 31 years of it were spent at Brigham Hall.

He was a nephew of Dr. Amariah Brigham, in whose honor the hospital had been named 21 years before Dr. Burrell's appointment, and from the first he took a peculiarly personal interest in this hospital. His wide previous experience, his attractive personality, his unflinching sense of humor and his careful attention to all details of any duty qualified him for large success at Brigham Hall. He did not spare himself in medical and administrative work; he spent much time also in the clinical instruction of

nurses. Many changes in the care of the insane were made during the 40 years of his professional life, but he adapted himself to them.

He gave much attention to the re-education and development of chronic cases as well as to the treatment of acute forms of mental disease, and in the former line of work often secured such good results as to enable patients to return to their homes, though not entirely recovered.

He was a public-spirited citizen and held many positions of trust in the village of Canandaigua. He was a member of the American Medico-Psychological Association, of the American Medical Association, of the Medical Society of the State of New York, of the County Society and of the Medical Societies of Rochester and Canandaigua.

In January, 1908, he had a stroke of apoplexy, which made him almost a helpless invalid until his death on June 18, 1910.

He was married, but left no children.

CYRUS BUTLER.

Cyrus Butler (1767-1849), a wealthy merchant of Providence, had for several years, to use his own language, "considered the insane as objects peculiarly worthy of commiseration." In the closing years of his life he expressed that consideration materially in a gift of \$40,000 towards the erection of Butler Hospital, thus supplementing the bequest of \$30,000 of Nicholas Brown, founder. The gift was contingent upon the raising of an equal sum from other sources, with the proviso that \$50,000 should be kept in a reserve fund, the interest of which should be used to defray current expenses of maintenance. As an expression of gratitude for Mr. Butler's munificence, the trustees, in 1844, changed the title of the institution as incorporated, namely, the "Rhode Island Asylum for the Insane," to the "Butler Hospital for the Insane," "to transmit to distant generations the example of this good deed." He died, without issue, August 22, 1849, in the 83d year of his age.

DR. JOHN S. BUTLER.

John S. Butler, M. D., died at Hartford, Conn., on the 21st of May, 1890, of chronic Bright's disease, in the 87th year of his age. He was born at Northampton, Mass., in 1803. He grad-

uated at Yale College in 1825, and after beginning the study of medicine in the office of Drs. Hunt and Barrett, of Northampton, attended a course of lectures at the Harvard Medical School, and took his degree there in 1828. Beginning in 1829 he was engaged for ten years in general practice in Worcester, Mass., where he was a frequent visitor at the lunatic asylum, and gained from Dr. Samuel B. Woodward a great interest in the care of the insane.

In 1839, when the Boston Lunatic Hospital was opened, as the result of the active efforts of Mayor Samuel A. Eliot, to relieve the deplorable condition of the insane confined in the House of Industry, he was appointed the first superintendent upon the recommendation of Dr. Woodward and remained in charge of the hospital for three years, when he resigned. A letter written at that time by Mr. Eliot, then ex-mayor, bears explicit testimony to Dr. Butler's success in removing the insane from "shocking cells," and treating them with "mingled kindness, care and skill." Similar testimony was given by Amos Lawrence and Drs. Hayward, Reynolds, Storer and others as to his special aptitude for the care of the insane.

In 1843 he was chosen superintendent of the Hartford Retreat for the Insane, and there he found a proper field for his marked abilities. For 30 years of continued service he kept the institution in the front rank of contemporary progress. His influence was large and useful, and was felt in the establishment of the State Hospital for the Insane in Middletown. After the Retreat had been relieved of the pauper patients which had crowded its wards he was able to realize his cherished ideas of the "individualized treatment of the insane," which were embodied in his book upon that subject entitled "The Curability of Insanity," published in 1886. The picturesque grounds of the Retreat, with its beautiful lawn, and the improvements initiated by him in the buildings, bear testimony to the earnestness and correctness of his belief that patients should be surrounded by attractive and home-like conditions.

He was one of the original 13 who organized the Association of Medical Superintendents in 1844, and was its vice-president for eight years, 1862-1869, and president for three years, 1870-1872. He was an honorary member of the Medico-Psychological Society of Great Britain. In 1872 he resigned his superintendency

and retired at the age of 70 years, continuing, however, an expert and consultation practice. In 1878 he was made the first president of the Connecticut State Board of Health, which published his first annual address on "State Preventive Medicine." He resigned that office after ten years, but retained his membership in the board until his death.

DR. H. A. BUTTOLPH.

Horace A. Buttolph, M. D., LL. D., was born April 6, 1815, in the Township of North East, Dutchess County, N. Y. His parents were Warren and Mary (McAllister) Buttolph. His father was of German and his mother of Irish descent. He read medicine with his mother's brother, Dr. Charles McAllister, of South Lee, Berkshire County, Mass. He received his medical education at the Berkshire Medical College, where he graduated in 1836, after three courses of lectures. He began the practice of medicine in Dutchess County, N. Y., but remained there only a short time. He afterwards resided at Sharon, Litchfield County, Conn., for five years. Later he attended medical lectures in the University of New York, and became deeply interested in mental science and the care of the insane.

When in 1842 the New York State Lunatic Asylum at Utica was about to receive patients, he made an application for a position upon the medical staff. Later he visited the leading asylums in the New England States, and upon his return became an assistant to Dr. Brigham, the first superintendent.

In 1847 he was elected superintendent of the New Jersey State Lunatic Asylum at Trenton. Before entering upon his duties he visited many of the asylums for the insane in Great Britain, France and Germany, in order to equip himself better for the superintendency. He remained superintendent at the Trenton Lunatic Asylum (now the New Jersey State Hospital at Trenton) for nearly 29 years, and was its guiding spirit in every progressive step taken by the management. In April, 1876, he resigned to take charge of the State Asylum for the Insane at Morristown (now known as the New Jersey State Hospital at Morris Plains).

In 1868-9 he had been appointed on a commission to select the site for the new institution at Morris Plains, and with Samuel Sloan, an architect of Philadelphia, designed the plans of the

magnificent structure, still remarkable for its substantial character and its architectural features. The hospital at Morris Plains, which bears the impress of his hand and intellect, is of granite and sandstone, beautifully located and in one of the most healthful districts of the State of New Jersey. Its cost before any patients were admitted was more than \$2,500,000. It has nearly eight acres of floor space.

In 1885 Dr. Buttolph resigned the superintendency of this institution because of a legislative act which made the administration of the institution dual in character. For 38 years his official relations to the Trenton and Morris Plains asylums had been that of superintendent, the supreme resident authority. To divide such authority was in his judgment a retrograde movement in the management of a medical institution. He accordingly resigned and retired to private life at Short Hills, N. J.

The law referred to provided for the appointment of a medical director and a warden; the medical director to have charge of all patients and to be supreme in the medical work proper of the institution and the warden to have charge of business and financial operations, including the control of all employees and business operations outside of the medical work proper. At the time of Dr. Buttolph's resignation there were 745 patients in the institution; it now accommodates about 2150 patients because of the erection of additional buildings.

He enjoyed the confidence and sympathy of the medical profession, especially of those engaged in the work of caring for the insane, throughout the country.

Princeton College conferred upon him the degree of LL. D. in 1872. He was a gentleman of the old school, dignified and highly refined in manner and with a high sense of honor in the performance of all official work. He wrote extensively for medical journals and magazines upon mental science, phrenology, and the care, treatment and management of the insane.

He married twice. His first wife, Catherine King, of Sharon, Conn., died in 1851. In 1854 he married Maria R. Gardner, daughter of John Syng Gardner, M. D., professor of anatomy in the University of Pennsylvania.

He died at Short Hills, Essex County, N. J., on the 21st day of May, 1898.

DR. ALFRED B. CABANISS.

Alfred B. Cabaniss was born in the City of Huntsville, Ala., on the 10th of December, 1808, and died in Hinds County, Miss., November 21, 1871, at the age of nearly 63 years.

He received his medical diploma from the Transylvania University at Lexington, Ky., then the great school of the West, in 1833, and in 1835 was admitted, *ad eundem gradum*, at Jefferson Medical College, Philadelphia.

He settled first in Raymond, Hinds County, and afterwards removed to Jackson, the state capital, where he gained a reputation for skill and kindness unsurpassed by that of any physician in Mississippi. He possessed in an eminent degree all the elements essential to a successful physician. With a philosophical and meditative mind he combined a warm-hearted geniality and a sympathetic cheerfulness, which made him welcome as a scientific physician and as a friend and adviser.

During the war, though far advanced beyond the military age, he was not an idle spectator, but at an early day offered his services to the sick and wounded Confederate soldiers, and for a long time was the post surgeon of the City of Jackson.

Soon after the war he was appointed superintendent of the Mississippi State Asylum. During his incumbency, for a period of four years, he gained the affection and good will, not only of the employees, but also of the patients, who regarded him as their father. Nowhere perhaps, except in his immediate family circle, did his death cast a sadder gloom than upon this household.

In life he made his mark among men, and dying left behind him an example worthy of imitation.

DR. JOHN H. CALLENDER.

Dr. John H. Callender was born November 28, 1831, near Nashville, Tenn. He attended the best classical schools in his native city, and at the age of 17 entered the University of Nashville, where he remained until 1850.

In 1851 he entered the law department of the University of Louisville, and in the following year went to Cambridge to avail himself of the more extended advantages offered by Harvard University.

His father's illness and death called him to his home, and he abandoned further prosecution of his legal studies.

He then commenced the study of medicine, receiving his degree as doctor of medicine from the University of Pennsylvania in 1855.

For three years he was joint editor and proprietor of the Nashville *Patriot*, and in 1858 was elected to the chair of materia medica and therapeutics in Shelby Medical College in Nashville, which position he occupied until 1861, when he was appointed surgeon to the 11th Tennessee Confederate Regiment.

In 1868 he was elected professor of materia medica and therapeutics in the Medical Department of the University of Nashville, and in the following year was appointed superintendent of the Tennessee State Hospital for the Insane, where he remained until 1895, a period of 26 years. He resigned his position, intending to establish a private sanitarium, but death overtook him just as his ideals were being realized. From 1869 to 1880 he occupied the chair of diseases of the brain and nervous system in the University of Nashville, and in 1880 he became professor of physiology and psychology in the conjoined medical departments of the University of Nashville and Vanderbilt University. When the two schools separated Dr. Callender became dean of the medical faculty of the University of Nashville and professor of diseases of the brain and nervous system.

At the session of the American Medico-Psychological Association in 1879 he was chosen president, being the youngest man ever thus elected. At the Ninth International Medical Congress at Washington in 1887 he was elected president of the section on physiology.

He died at his private sanitarium, Morningside Retreat, in East Nashville, August 3, 1896, after an attack of dysentery.

DR. EUGENE GROVE CARPENTER.

Dr. Eugene Grove Carpenter was born in the village of Newville, Richland County, Ohio, January 14, 1857. He assisted his father in the manufacture of leather in early life, and thus he acquired the sound business principles which were so helpful in his later career. He obtained his education in the public schools

of Mansfield and the Ohio Wesleyan University at Delaware, graduating from the latter institution in 1882. In 1884 he graduated from the College of Physicians and Surgeons, Baltimore, Md. In 1885 he was appointed assistant physician of the Cleveland State Hospital, then under the management of Dr. Jamin Strong. Here he received his first impulse toward the study of psychiatry. After leaving the Cleveland State Hospital he practiced medicine for a time in Cleveland, and in 1894 visited New York for a post-graduate course, and later Vienna and Berlin. In 1896 he visited Heidelberg for special courses under Erb and Kraepelin, and later Paris and London. Upon his return home he became a member of the staff of the Cleveland City Hospital, and shortly after was appointed a trustee of the Massillon State Hospital. In 1898 he was appointed superintendent of the Columbus State Hospital to succeed Dr. A. B. Richardson, who had been made superintendent of the Government Hospital at Washington, D. C.

From his boyhood he was of a happy, cheerful disposition, and was particularly beloved. He had an observing mind and a memory for details. He was inclined to research and was never satisfied to accept a statement until he knew the reason for it. He was a kind but strict disciplinarian and was intolerant of any severity towards his patients. His thorough knowledge of elementary principles of medicine and physiology enabled him to form a sound judgment. He was not considered by his friends a brilliant man of the meteoric variety, but his deliberate, careful, conscientious and exhaustive examination of patients placed him in the front rank as an insanity expert, and his testimony had great weight in court. His excellent memory gave him great advantage, and his ability to call up principles and facts which he had learned in youth was remarkable.

Dr. Carpenter was apparently in robust health up to the very day of his apoplectic attack. He was stricken October 16, 1902, and never regaining consciousness, passed peacefully away three days later.

DR. GEORGE C. CATLETT.

Dr. George C. Catlett, superintendent of the Missouri State Lunatic Asylum, No. 2, St. Joseph, Mo., died May 19, 1886, of acute cystitis, after an illness of ten days. He was born in

Christian County, Ky., June 20, 1828, and was nearly 58 years of age at his death. He was educated in the Kentucky Academy, and studied medicine in the University of Pennsylvania, where he graduated in 1851. He began the practice of his profession in St. Joseph and paid especial attention to surgery. From 1858 to 1861 Dr. Catlett was one of the editors of the St. Joseph *Medical and Surgical Journal*. At the breaking out of the war he entered the Confederate service as surgeon. He was in many of the most trying campaigns of that struggle, and gained an honorable record.

When the State Lunatic Asylum, No. 2, was completed, in 1874, Dr. Catlett was made superintendent and held the position at the time of his death. Under his able management the asylum became equal to any in the state. When the St. Joseph Medical College was chartered, in 1877, he was made professor of physiology and of nervous and mental diseases. He was widely and favorably known; his death was a serious loss to the medical profession and to the state.

DR. GEORGE CHANDLER.

George Chandler, M. D., died at Worcester, Mass., May 17, 1893, aged 87 years. He was born in 1806, a native of Pomfret, Conn., and the son of Major John Wilkes Chandler. He entered Brown University, but left it to graduate from Union College. In 1831 he began the practice of medicine in Worcester, and a few years later was made assistant physician of the State Lunatic Hospital in Worcester. From Worcester he was called to the charge of the Insane Asylum at Concord, N. H., and in 1846 he was recalled to be superintendent of the Worcester Asylum. He remained in this office for ten years, resigning in 1856, and during the remainder of his life devoted himself to private special practice, to travel, and to historical and genealogical studies, in which he took much interest and for which he had leisure. He prepared the genealogy of the Chandler family, as descended from William and Annis Chandler, who settled in Roxbury in 1637. The volume, a large octavo, was printed, but nearly the whole edition was destroyed in the great Boston fire of 1877. He immediately set to work to prepare a new and enlarged edition of 1300 pages, which is confessedly the most complete work of

the kind ever published in the United States. One can hardly estimate the immense labor, travel and research which such a compilation cost. He was a man of great skill in his profession, and especially in that branch to which he gave his active professional life, but was extremely modest and was the soul of honesty. He hated all pretense and sham. He was held in high honor by his professional brethren, and by students of American history, among whom he counted his relative and friend, George Bancroft. He was twice married, his first wife being Josephine Rose, of Antigua, West Indies, by whom he had two daughters. For his second wife he married Mrs. Charles A. Wheeler, of Worcester, a widow, who survived him.

During his professional activity and the following years Dr. Chandler was connected with various other interests. In 1839 he was commissioned by Governor Everett surgeon of the Light Infantry, M. V. M.; a justice of the peace; a member of the Massachusetts Medical Society; an honorary member of the New Hampshire, Connecticut and Rhode Island medical societies; a member of the American Antiquarian Society; inspector of the state almshouse at Monson; Representative to the Legislature in 1859, and Alderman in 1862.

In the latter year he was at Fortress Monroe as medical chief of the ship *St. Marks*, detailed to bring North wounded Federal soldiers.

DR. WILLIAM S. CHIPLEY.

Dr. William S. Chipley was born at Lexington, Ky., October 18, 1810. He received an academic education and later the degree of M. D. (1832) from the Transylvania University. Soon after graduating he commenced the practice of medicine in Columbus, Ga., but returned to Lexington in 1844. Successful as a practitioner and reputable as a man of learning, he was elected to the chair of theory and practice of medicine in the Medical Department of Transylvania University in 1853, and delivered the lectures from that chair until called to the position of superintendent of the Eastern Lunatic Asylum of Kentucky at Lexington, in 1855. This position he occupied for 15 years, discharging the incumbent duties with ability and marked devotion to the interests of the insane as well as the interests of the state.

Personal and political exigencies compelled Dr. Chipley to resign the superintendency in 1870. Soon after his resignation he opened a private hospital for the insane at Lexington, which he conducted until 1875, when he accepted the superintendency of the Cincinnati Sanitarium. Here in the successful discharge of professional duties he died, February 11, 1880.

DR. JOSEPH MANNING CLEAVELAND.

Joseph Manning Cleaveland was born at Newburg, Mass., July 22, 1824. He was of New England parentage, but had Southern relatives; his maternal grandfather, Dr. Manning, a physician of note, practiced many years in Charleston, S. C.

He received his early education at Dummer's Academy, and later at Phillips Exeter Academy.

His collegiate course was taken at Princeton, where he graduated with the degree of B. A. in 1846.

He began his medical studies in New York City at the College of Physicians and Surgeons, from which he received his degree in 1850.

From 1850 to 1853 he served as house physician in the New York Hospital and was one of the few members of the medical staff who survived the typhus fever epidemic of 1851.

In 1854 he had a year of open-air life as surgeon to mining camps about Lake Superior, where he formed a friendship which lasted for a lifetime with the late distinguished Dr. C. R. Agnew, of New York.

Upon his return to New York City he accepted from the Commissioners of Immigration the position of examining physician, which widened his varied medical experience and added to his knowledge of languages.

He was appointed assistant physician at the Utica State Hospital December 1, 1857, and resigned the position April 1, 1867, to become superintendent of Hudson River State Hospital.

His service at Utica under Dr. Gray laid a broad foundation for his success as an alienist. He there learned by constant study in a wide clinical field the varieties and intricacies of mental disease and developed his executive ability in hospital management, and also made his first essays in the literature of psychiatry in helping to edit *The American Journal of Insanity*.

In March, 1867, he began the great professional work of his life as medical superintendent of Hudson River State Hospital, which position he filled until his resignation in March, 1893. During these 26 years he fought the good fight for the mentally afflicted, and kept the faith of his Hippocratic oath in placing the interest of his patients above all other things. He had high ideals and firm convictions as to the care and cure of the insane. He believed it to be economy for the state to furnish the best possible hospital accommodations, food, nursing and medical treatment, that the insane might be cured and not accumulated as an expensive and hopeless public burden. Acting under these views he made Hudson River State Hospital one of the most perfect in the world in its buildings and general equipment. He had superior knowledge of hospital construction, and personally directed all architectural plans.

Long years of practice in New York hospitals had well qualified him for the medical work of his office. His broad view was that the insane were to be treated like other sick patients, by general principles of practice, by symptomatic and etiological indications. He had little sympathy with the use of special remedies or the refinements of classification in insanity.

He had advanced views as to the psychiatric value of different forms of occupation and diversion, and much credit given later workers in this field might well, in point of date at least, be accorded to him. In 1875 he had a day school for patients, and ten years later had paid instruction for them, not only in English branches, but in languages, music and designing. About this time also he drew a legislative bill for a training school for nurses, which was one of the first established in a hospital for the insane in this country.

In 1886 he went to considerable expense to construct and equip a pathological laboratory in the Hudson River State Hospital; for, though skeptical that problems of mind could ever be solved by the microscopic study of matter, he still hoped that some lucky ray of light might reveal something of the nature of mental diseases.

As the chief medical officer of a hospital community he was highly esteemed and respected by patients and employees. In the management of subordinates he was a strict disciplinarian, be-



DR. JOSEPH MANNING CLEVELAND.

lieving that severity was essential for the protection of patients and the general welfare of the institution.

He died of pneumonia, at Poughkeepsie, N. Y., January 21, 1907.

DR. GEORGE COOK.

Dr. George Cook was born in Cayuga, N. Y., November, 1824. After receiving an education in a local academy he began the study of medicine with Dr. Shaw, of Cayuga, and received his degree at the Geneva Medical College in 1846. On the recommendation of Dr. C. B. Coventry, a professor of the college and a manager of the State Lunatic Asylum at Utica, then under the charge of Dr. Brigham, he was appointed an assistant physician in June, 1848. On the death of Dr. Brigham, in 1849, he became the acting superintendent, and wrote the seventh annual report.

He spent a portion of 1853-4 in general hospitals and private asylums in England and France. On his return in 1854 he resumed his service at Utica. The institutional care of the insane in New York at this time was limited to Utica Asylum, Bloomingdale Asylum, and Sanford Hall at Flushing, L. I., a private institution. The three institutions together furnished a total accommodation for about 470 private patients. To meet the needs of private patients Dr. Cook, with the approval and at the recommendation of the managers of the Utica Asylum, established a private hospital at Canandaigua, N. Y., under the name of Brigham Hall, in memory of Dr. Amariah Brigham. In 1859 the institution was incorporated by a special act of the Legislature as "Brigham Hall, a Hospital for the Insane."

In 1855 he removed to Canandaigua. Dr. John B. Chapin became associated with him in 1858 as one of the resident physicians.

During his 21 years of service at Brigham Hall he treated more than 1000 patients.

He made several contributions to medical literature, such as papers on "Mental Hygiene," on "Inebriety," "Notes on European Asylums," "Transitory Mania" and "Provision for the Chronic Insane."

He was a trustee of the Canandaigua Academy, of the Ontario Female Seminary and of the Ontario Orphan Asylum. He was twice elected president of Canandaigua Village. On the organiza-

tion of the National Bank of Canandaigua he was elected president. He was also elected supervisor and afterwards a representative to the Legislature. He was prominent in the movements that led to the creation of the Willard State Hospital.

As a physician, in the management of all the delicate relations which pertain to the insane and to hospitals for the insane; as a citizen of the community in which he lived, and as a Christian, he discharged every obligation to the fullest measure of his capacity and strength, without ostentation, conscientiously and from conviction. His life was passed in the service of and for the benefit of others.

To the circumstances of his sad and sudden end which occurred at the hands of a patient, June 12, 1876, while in personal professional attendance upon him, it is not proposed to allude, except to record the fact. In his last communication with his pastor a few days before his death he referred to the uncertainty of life and his preparation for death, and expressed his hope and prayer that when the summons came it might be sudden.

DR. GEORGE F. COOK.

Dr. George F. Cook died at his home in Oxford, Ohio, on September 23, 1910, at the age of 64 years.

He was born in Hamilton, Ohio, in 1846, was educated at the public schools in Eaton, Ohio, and under private tutors, and studied medicine at Eaton and in Holden, Mo.

He graduated from the Medical College of Ohio in 1872, and began practice at Somerville, Ohio.

In 1886 he became chief physician to the Oxford Retreat, a private hospital for mental and nervous diseases, and occupied the position during the remainder of his life.

He was successful in the management of the institution, and it was chiefly through his ability that the hospital grew to be a large institution, second to none in reputation in the Middle West.

He was prominent in church, Masonic and financial circles, and was for many years president of the National Bank of Oxford. He was an active member of the Medico-Psychological Association for many years, and rarely missed attendance at the annual sessions. He was a "gentleman of the old school" in his courtesy and consideration for others under all circumstances.

OSCAR CRAIG.

Hon. Oscar Craig was born of Scottish parentage at Medina, N. Y., November 14, 1836. He graduated from Union College at the age of 26, and three years later received the degree of A. M. from the same college. He studied law at Buffalo, where he was admitted to the bar one year after his graduation. He located in Rochester, but owing to ill health visited the South and resided for a time at Savannah, Ga. He returned to Rochester in 1868, which continued to be his place of residence until his death. He was connected with several charitable institutions and took great interest in their management. In 1880 he was appointed by Governor Cornell a member of the State Board of Charities in place of Martin B. Anderson, president of Rochester University; which position he retained until his death. In April, 1889, he was elected president of the board.

He was a citizen of rare worth and usefulness. He was at all times interested in reformatory and charitable work, and, though pressed with professional duties, he never allowed his business to interfere with his official obligations. While president of the board he became thoroughly familiar with the charitable and reformatory institutions of the state, and none escaped his careful scrutiny. His aim was to sustain and improve institutions, not to destroy them, and hence he strove to correct abuses and to abate all discoverable errors of management without disturbing their orderly operation. His most notable work was in connection with the organization of the Lunacy Commission and the passage of the State Care Act.

He died at his residence at Rochester, January 2, 1894, in the 58th year of his age.

He wrote largely on questions relating to charitable institutions, and also contributed many able papers to religious periodicals of the Presbyterian faith. He was an impressive and forceful speaker on all occasions. In personal appearance he was dignified, and had great urbanity of manner. Kindness, gentleness and goodness were expressed in every feature.

DR. JOHN CURWEN.

John Curwen was born at Walnut Hill, in Lower Merion Township, Montgomery County, near the City of Philadelphia, Pa., on his father's estate, September 20, 1821, and died after a brief illness July 2, 1901. His parental ancestors lived in Little Broughton, Bridekirk, County of Cumberland, England. He was a graduate of Yale College of the class of 1841. In 1844 he received the degree of M. D. from the University of Pennsylvania. After spending several months at Wills Hospital for Diseases of the Eye, he was appointed during the same year an assistant physician of the Pennsylvania Hospital for the Insane. He was thus brought into close personal and professional relations with Dr. Kirkbride, whose character and methods of administration did much to influence and shape the course of his after-life. Reference is made in the report of the Pennsylvania Hospital for 1845 to the establishment of a course of lectures for the entertainment and instruction of patients, and to the zeal and co-operation of Dr. Curwen, which contributed so much to "the very gratifying success of the experiment." The number of lectures varied from 45 to 50 during the year. Dr. Kirkbride, in a succeeding report, states that "the manner in which Dr. Curwen has acquitted himself of this self-imposed task is worthy of high commendation." In addition to his medical duties he showed at this early age the untiring zeal and capacity for work characteristic of his entire life.

Dr. Curwen was appointed physician and superintendent of the State Lunatic Asylum at Harrisburg, February 11, 1851, which he organized and administered until February 1, 1881.

On the 24th of June, 1881, he was elected physician and superintendent of the Warren State Hospital for the Insane, an office which he held until June 15, 1900.

He was one of the commissioners to locate and build the Danville State Hospital, and later acted in the same capacity to erect the Warren State Hospital. He was appointed a commissioner to locate and erect an asylum for the chronic insane, but subsequently resigned. He was connected with hospitals for the care and treatment of the insane, with scarcely an interval, for a period of 57 years—a record of service without parallel in our country. In addition to official hospital duties, he exercised much influence

in shaping legislative and public sentiment in the interests of the insane, and his opinion as an expert was often sought in lunacy trials.

He was an honorary member of the British Medico-Psychological Association; of the American Philosophical Association; of the American Medical Association; of the State Medical Society of Pennsylvania; of the county societies of Dauphin and Warren; president of the State Society in 1869, and trustee of La Fayette College in 1865.

Dr. Curwen was best known to the members of the American Medico-Psychological Association as the secretary and acting treasurer of that body—a double office—for a period of 34 years. To him a lasting debt of gratitude has been due for keeping a record of its proceedings and preserving its archives during this long period. In 1893 he was made president of the association. He was a frequent contributor to the literature of his profession in communications to *The American Journal of Insanity*; to medical societies, through the medium of his annual reports, and on several occasions through memorials to the State Legislature to urge increased accommodations for the insane. Although not a member at the time, he was the last survivor of those who were present when the American Medico-Psychological Association was organized under its earlier name and had a personal acquaintance with each of the 13 founders.

The habits of fidelity to his trust, and of constant industry, formed in early life, continued to the last day of his official life and as long as strength of mind and body remained. He stood for the principles of his profession in every effort to ameliorate the condition of the insane. He possessed the moral courage born of honest purpose and convictions, and the inestimable quality of Christian character and sympathy for distress and human suffering without which even medical skill and science are unavailing in hospital administration. He was a man of religious convictions and an elder of the Presbyterian Church. During his official life it was his daily rule to meet his patients, as they could be brought together, and to lead them in a service of Scripture reading, song and prayer, by which he hoped to impart hope, comfort and consolation to them, and to receive a blessing upon himself and his work.

DR. NEHEMIAH CUTTER.

Dr. Nehemiah Cutter was born in Jaffrey, N. H., on March 30, 1787. He graduated at Middlebury College in 1814 and received the degree of M. D. from Yale College in 1817. He commenced practice in Pepperell, Mass., in 1818. He had charge of an insane person in that year, and about 1822 began to receive insane persons into his family. The number of patients increased so rapidly that he was obliged to make additions to his house, until, in 1834, he built a new and larger building in addition to those already erected. He associated with him at different times several gentlemen for varying periods, until his institution was burned down in May, 1853. It was not rebuilt.

As a patron of education, he contributed largely of his own means to found and support an academy in Pepperell. Self-possessed on all trying occasions, even in temper, social and affable to a degree, he acquired a powerful and salutary influence over the minds of his patients. His interest in the public welfare rendered him greatly beloved and his loss was sincerely regretted. He died on March 15, 1859.

DR. EMMET C. DENT.

Dr. Dent, born at Macon, Miss., October 11, 1857, studied medicine at the University of Virginia and graduated at the Bellevue Hospital Medical College, February 27, 1879. He entered the service at Blackwell's Island Hospital during the same year and became its medical superintendent seven years later. In 1896 he became superintendent of the department for women on Ward's Island and remained in that position until he succeeded Dr. Macdonald as superintendent of both divisions in 1904. His untimely death occurred very suddenly January 12, 1906.

He devoted the whole of his adult life to the care and treatment of the insane. He had an original and versatile mind. He developed hydrotherapy in all its branches and was able, to a remarkable extent, to discontinue the use of sedative drugs and to substitute for them prolonged baths and hot and cold packs. Beneficial results also followed other improved methods, such as systematic gymnastics, dancing and excursions. He maintained his nurses' training school at a high standard and took special interest

in this branch of the service. He had a strong personal interest in his patients, and, although the most genial of men, he was fiercely indignant with official shortcomings of every sort and no subordinate ever risked offending a second time against the discipline of the institution.

He was a member of the leading medical and psychological bodies, was professor of psychiatry in the New York School of Clinical Medicine, and was secretary of the American Medico-Psychological Association at the time of his death.

DR. OLIVER M. DEWING.

Dr. Oliver M. Dewing, superintendent of the Long Island State Hospital, Brooklyn, N. Y., died March 14, 1910, of pneumonia. He was born at Westminister, Conn., July 18, 1862; educated at the Williston Seminary, East Hampton, Mass., and graduated from the College of Physicians and Surgeons, New York, in the class of 1887. He was physician at the DeMilt Dispensary and was in general practice for two years. In June, 1889, he was appointed physician at the New York City Asylum for the Insane on Ward's Island, now Manhattan State Hospital. On December 11, 1889, he was appointed assistant physician at Kings Park. In 1893 he was advanced to the position of medical superintendent of the Long Island State Hospital, which embraced what are now known as the Kings Park State Hospital and the Long Island State Hospital. In 1900 the position of general medical superintendent was abolished and Dr. Dewing was retained as medical superintendent of the Kings Park State Hospital. He was transferred to the Long Island State Hospital as its superintendent in June, 1904.

He was a member of the Kings County Medical Society, the Brooklyn Society of Neurology, the Associated Physicians of Long Island, the Physicians' Mutual Aid Association and the American Medico-Psychological Association.

He was a man of determined character, quiet and unostentatious in manner, studious and progressive in all that pertained to his office and profession; his greatest efforts were for the benefit of the patients themselves. His work at Kings Park State Hospital is a lasting monument to his efforts to attain a high standard of care for his patients. It is to be regretted that he did not live to carry out his ideals in the reconstruction of the hospital.

DR. JOSEPH DRAPER.

Dr. Joseph Draper, superintendent of the Vermont Asylum, died March 17, 1892, after a brief illness. He was born in Warwick, Mass., February 11, 1834. He was of New England ancestry, both his father and mother being natives of Massachusetts. His early education was obtained in the common schools and in the academies at Brattleboro, Vt., and Deerfield, Mass. After he entered upon the study of medicine, he attended lectures at one of the medical schools in New York and also at the Jefferson Medical College, Philadelphia, Pa., where he graduated in 1858. After a considerable period in general practice, he became an assistant of Dr. Rockwell in the Vermont Asylum, later the Brattleboro Retreat, where he remained until January, 1865.

He left this position for that of an assistant surgeon in the U. S. General Hospital at Brattleboro, in which he remained a few months, and in May, 1865, became an assistant in the State Asylum at Worcester, Mass. He was also acting superintendent of that institution for one year. In 1870 he became an assistant to Dr. Buttolph in the State Asylum at Trenton, N. J., where he remained until February, 1873, when he was appointed superintendent of the Vermont Asylum.

He devoted himself to the conduct of the asylum with a singleness of purpose rarely excelled by any of his associates in the country. His first and last thought related to its improvement, and provision for the best treatment of those who sought its care. The changes which he made related not only to the internal sanitary arrangements, the better lighting and adornment of the halls and rooms, but also to a thorough system of clinical study and treatment of cases. The thoroughness with which this was carried out was shown by the papers which he presented before the American Medico-Psychological Association, the New England Psychological Society, and the Vermont Medical Society.

Dr. Draper endeared himself not only to those immediately associated with him, but also to the community in which he lived as few other superintendents have ever been able to do by becoming identified with its growth and interests. He was the prime mover in establishing a society whose main object was beautifying the village which lies on the banks of the Connecticut nestled

close between the mountains. These mountains he loved not only to look upon, but to ascend and look from.

His friendships were strong and enduring. He hated all shams. His face and physique indicated strong purpose and inflexible resolution. When once he had arrived at a conclusion, only the clearest evidence that he was in the wrong deterred him from going forward.

He was in closest touch and sympathy with everything that concerned psychiatry and psychology, and was jealous of the reputation of our hospitals and asylums. During his long residence in Vermont his name became a household word, familiar to a large portion of the people by whom he was held in the highest esteem.

He was the author of a history of the Vermont Asylum, or Brattleboro Retreat, covering its first 50 years. At the time of his death he was president of the New England Psychological Society and had also been president of the Vermont Medical Society.

ALEXANDER DUNCAN.

Alexander Duncan (1805-1889), of the original Board of Trustees of Butler Hospital, Providence, R. I., and for many years President of the corporation, was a native of Scotland and received his early education in that country. Coming as a young man to the United States, he graduated at Yale College and became a prominent, prosperous and philanthropic citizen of Rhode Island. He married the niece and heiress of Cyrus Butler (*q. v.*). His gifts to Butler Hospital in land, buildings and money were lavish. His memory is perpetuated in the Duncan Ward (\$50,000), Duncan Lodge (\$20,000), and the Duncan Improvement Fund (\$40,000), as well as in numerous other notable benefactions. He died in Scotland October 14, 1889.

DR. ROBERT J. DYSART.

Dr. Robert J. Dysart died at the Northern Hospital for the Insane at Winnebago, Wis., May 26, 1914, after a prolonged illness, leaving a wife and infant daughter. He was born at Albany, N. Y., November 23, 1872. When young he went West with his parents, and received his preliminary education in the public

schools of Minnesota and Wisconsin. Later he attended Lake Forest University, Illinois, from which he graduated in 1893 with the degree of B. S. His medical education was received at the College of Physicians and Surgeons of Chicago in 1900. Until 1906, when he entered the service of the Northern Hospital for the Insane as third assistant physician, he was in general practice in Wisconsin and Dakota, except for about a year, when he served as assistant physician in the Northern Hospital.

From the position of third assistant physician he was advanced to that of assistant superintendent, which position he held at the time of his death.

He was held in high esteem because of his direct methods in dealing with people, his consideration for others, and his honesty, loyalty and professional ability. His early removal from the field of his activities will be regretted long by his friends and the institution in which he so faithfully labored.

He was a member of the Winnebago County Medical Society and the Wisconsin Medical Society, and an associate member of the American Medico-Psychological Association.

DR. PLINY EARLE.

Dr. Pliny Earle was born in Leicester, Mass., December 31, 1809. He was descended from Ralph Earle, who was one of the petitioners to Charles II of England for permission to form Rhode Island into a corporate colony. His father, Pliny Earle, resided in Leicester, and a manufacturer, and to some extent an inventor, is said to have done much to change the methods of wool carding then in use. The family belonged to the religious body of Friends, of which society Dr. Earle remained a member as long as he lived. His early education was at the Leicester Academy, then and for many years afterwards a famous school. He later went to the Friends' School at Providence, R. I. His medical studies were pursued mainly at the University of Pennsylvania, where he graduated in medicine in 1837. He then went to Europe and spent considerable time in the hospitals of Paris, and afterwards visited many asylums for the insane in the different countries of Europe. In 1840 he became resident physician at the Friends' Asylum at Frankford, Pa. While holding

this position he was appointed in 1844 medical superintendent of the Bloomingdale Asylum of New York. This position he relinquished after five years of service and made a second visit to Europe to further study the treatment of the insane. Upon his return he was appointed visiting physician to the New York Asylum, and during the same year he delivered his first course of lectures on mental diseases at the College of Physicians and Surgeons. At a later period he became professor of *materia medica* and psychology in the Berkshire Medical Institute at Pittsfield, Mass. After a single course of lectures he severed his connection with the institution to accept the superintendency of the hospital at Northampton, Mass. This position he held during 22 years. His term of service, which closed in his 76th year, was marked by some of his most important work. He had the entire confidence of the directors of the hospital; he was both superintendent and treasurer, and his excellent business qualifications and experience enabled him to make his administration in both positions very successful.

He was one of the original members of the American Medico-Psychological Association and president in 1884; of the New England Psychological Society; of the New York Academy of Medicine, and of the American Medical Association and vice-president during one year. He was a member of several state medical societies; of the American Philosophical Society; a corresponding member of the Medical Society of Athens and an honorary member of the British Medico-Psychological Association.

During his long professional career he made many contributions to the literature of insanity. Of these may be mentioned "A Visit to Thirteen Asylums in Europe," 1841; "History, Description and Statistics of Bloomingdale Asylum for the Insane," 1848; "Blood-Letting in Mental Disorders," 1854; "Institutions for the Insane in Prussia, Austria and Germany," 1854; "Psychologic Medicine—Its Importance as a Part of the Medical Curriculum," 1867; "The Curability of the Insane," 1877; etc.

He prepared 22 annual reports of the Northampton Hospital and five of the Bloomingdale Asylum. In 1841 he published a volume entitled "Marathon and Other Poems."

He was a man of marked individuality, active mind, retentive memory, and good judgment. He exerted a decided influence

upon those who came under his care as well as those with whom he was associated in psychiatry. His observations and study of hospitals in the countries of Europe and America, which were probably more extensive than those of any other American physician, gave him a high rank while a comparatively young man. This position he continued to hold as long as he lived, while his mental faculties remained in a vigorous condition till a later period of life than is common with men. He was positive in his convictions, and held tenaciously to any course of action he had adopted. He was thoroughly conscientious, and, while never aggressive or fond of discussion, was always ready to state and defend his views upon all subjects relating to insanity. He was a diligent reader, and probably, during a longer period than any other superintendent in the country, continued to contribute to the literature of insanity. He was diligent, painstaking, and thorough in his work as a superintendent and physician. He retired from the duties of superintendent at the age of 76, but continued to occupy apartments in the hospital, where he died. His deep interest in its welfare and indeed in all that pertained to medicine continued to the last. He never married.

DR. BERNARD D. EASTMAN.

Dr. Bernard D. Eastman was born in New Hampshire, February 5, 1836. His early life was spent in New England. He graduated in medicine from the College of Physicians and Surgeons in New York. Soon after he became a member of the medical staff of the New Hampshire Asylum at Concord, N. H. Later he accepted a position on the staff of the Government Hospital at Washington, which he held for seven years. He then accepted the superintendency of the Worcester State Hospital, then in process of construction, where he remained seven years and constructed, organized and developed the hospital.

Receiving a call to Kansas, he resigned in 1879 to take charge of the Topeka State Hospital. Here he remained, with the exception of two brief intervals, when he was removed from office for political reasons, for a period of 18 years.

He died September 11, 1909.



DR. E. C. DENT.



DR. B. D. EASTMAN.



DR. J. P. GRAY.



DR. P. O. HOOPER.

DR. WILLIAM MILAN EDWARDS.

Dr. William Milan Edwards was born near Peru, Ind., September 17, 1855, his father being a native of Ohio, his mother a native of Kentucky. After an education in the common schools at Peru, one year at Smithson College, Logansport, two years at the University of Indiana, and two years of teaching at his home district school, he began to study medicine at Peru in 1880, graduating later from the University of Michigan in 1884. He was appointed assistant physician in the Michigan Asylum for the Insane at Kalamazoo in the same year, and in 1891 was made medical superintendent to fill the place vacated by the resignation of Dr. George C. Palmer. He was a member of the American Medico-Psychological Association, vice-president of the Michigan State Medical Society; in 1904, associate editor of *Physician and Surgeon*, Ann Arbor, Mich.; in 1898, non-resident lecturer on insanity, the University of Michigan, and the author of many papers. During his administration of Kalamazoo Asylum the antiquated buildings were practically reconstructed; the colony system was developed and extended; detached hospitals and infirmaries for patients of both sexes erected. He organized a highly effective training school. In person he was fully six feet in height, well proportioned, with dark hair and complexion; he was gentle of speech, winning in expression and considerate in manner. He had the power to secure the interest and cooperation of many persons in his plans and purposes and to blend the most inharmonious elements into an efficient working force.

On August 10, 1897, he married Emma Adele Merritt, of Union City, Mich., who survived him. He died April 26, 1905, at the hospital of the University of Michigan at Ann Arbor, from chronic cardiac disease.

Two of his papers were "The Public Care of the Epileptics by Colonization," Trans. Mich. State Med. Soc., 1884, and "The Early Recognition and Treatment of Insanity at Home," Trans. Mich. State Med. Soc., 1899.

DR. EDWARD PIERSON ELLIOT.

Dr. Elliot, first assistant physician to the Danvers Lunatic Hospital, died January 11, 1897, after a short illness.

He was born March 1, 1856, in Boston, but his parents soon afterward removed to Somerville, Mass., where his early life was spent. From childhood he showed a remarkable capacity for the acquisition of knowledge. In school he amused himself by keeping up with the work of classes in advance of his own by listening to their recitations, and was thus able to enter the high school at the age of 11 and Harvard University at 15. He easily took high rank as a scholar in his college course, graduating in 1875. After graduating he engaged in business, and later for a few months in teaching. In 1877 Dr. William B. Hills, of the Harvard Medical School, urged him to study medicine, and offered him an opportunity to defray his expenses by assisting in the chemical laboratory. In the medical school, as elsewhere, he impressed all with his remarkable ability. Graduating in 1881, he obtained an appointment at the Boston City Hospital and remained there several months beyond the regular term of two years, at the request of the staff.

After leaving the hospital Dr. Elliot went to Europe for two years of study in Berlin and Vienna. He then joined in a notable yacht cruise to Japan, Java, the Pacific Coast and the West Indies. Immediately on his return, in 1886, he was appointed by Dr. W. A. Gorton, of the Danvers Lunatic Hospital, to fill the position made vacant by his own promotion. Of his characteristics and work Dr. Gorton writes as follows:

It was most evident to all who were associated with him, as they grew to know him better, that Dr. Elliot was a man of rare intellectual gifts, highly developed by close and accurate study and careful and systematic culture. He was, from the first, painstaking and conscientious in his clinical work, and displayed great capacity for its performance. He was an indefatigable student, familiarizing himself with the literature of psychiatry in all tongues. That is to say, he read with ease French, German, and Italian, and made himself master of nearly everything written on mental disease in those languages.

However, so great was his modesty that he seldom or never obtruded his knowledge upon persons less well informed, but was always ready to put it at their service when requested so to do. Nor was his reading confined to medical literature. He read widely in the field of history, literature and science. One seldom meets a man with so great a capacity for reading and such powers of assimilation as Dr. Elliot possessed.

DR. JEREMIAH THOMAS ESKRIDGE.

Jeremiah Thomas Eskridge, the son of Jeremiah and Mary Marvel Eskridge, was born June 1, 1848, in Sussex County, Del. His family dated from George Eskridge, a native of Scotland, who came to America in 1660 as judge of the King's Bench in Virginia.

When a boy he worked on a farm and attended a country school until 15, when he began teaching in the schools of his native county. With the money thus gained he entered at 18 the Classical Institute at Laurel, Del. He later entered Jefferson Medical College at Philadelphia, where he took his medical degree in 1875.

He was president of the Philadelphia Northern Medical Society; director of the Philadelphia County Medical Society; member of the College of Physicians of Philadelphia; of the American Neurological Association, and of the New York Medico-Legal Society.

Immediately after graduation he practiced in Philadelphia, and for a time was assistant demonstrator of anatomy in Jefferson Medical College and physician to the Philadelphia Dispensary. In 1879 he was appointed lecturer on physical diagnosis at the Philadelphia School of Anatomy, and attending physician to St. Mary's Hospital. He was elected in 1880 attending physician to Jefferson Medical College Hospital; in 1882, neurologist to the Howard Hospital, and in 1883, post-graduate instructor in mental and nervous diseases in Jefferson Medical College.

Dr. Eskridge's health failed in 1883, and in 1884, on account of tuberculosis of the lungs, he removed to Colorado Springs, where he spent four years, and in 1888 went to Denver, where he again entered upon practice. In 1889 he was appointed neurologist and alienist in the Arapahoe County and St. Luke's hospitals, and the next year began a course of lectures on the diseases of the nervous system in the University of Colorado. In 1892 he was appointed dean of the medical faculty of the same institution and professor of mental and nervous diseases and of medical jurisprudence, but in 1897 he resigned, severing all connections with the college. In 1895 he was appointed commissioner of the State Insane Asylum and from 1895 to 1898 was president of the board.

Dr. Eskridge died in Denver, Colo., January 15, 1902, of cerebral thrombosis, from chronic interstitial nephritis. His writings numbered over 60 papers.

DR. ORPHEUS EVERTS.

Orpheus Everts was born December 18, 1826, at Salem Settlement, Union County, Ind., of Vermont ancestors, who settled in Ohio in 1795. His early education was obtained in the common schools, and he studied medicine under the direction of his father, Dr. Sylvanus Everts, and Dr. Daniel Meeker, of La Porte, Ind. Graduating at the Medical College of Indiana in 1846, he later received honorary degrees from the University of Michigan and from Rush Medical College.

He entered upon the practice of medicine in 1846 at St. Charles, Ill., where he married a daughter of Dr. George W. Richards. After several years of practice he retired to accept the editorship of a newspaper at La Porte, Ind., where he resided for three years. He then studied law and was admitted to the bar in 1860. During his law studies, he was registrar of the United States land office at Hudson, Wis., and a Presidential elector from his native state.

The opening of the Civil War found him a surgeon and major of the 20th Regiment, Indiana Volunteers, in which position he remained throughout the war, participating in every battle of the Army of the Potomac with the exception of those at Bull Run and Antietam.

After the war he devoted his attention to psychiatry and diseases of the nervous system, and in 1868 was appointed superintendent of the Indiana Hospital for the Insane, which position he filled for 11 years. He also occupied the chair of nervous and mental diseases in the Medical College of Indiana. He was widely known as an alienist, and his services were frequently sought in consulting practice and in medico-legal cases, notably by the United States Government in the trial of Guiteau. In 1880 he was made medical superintendent of the Cincinnati Sanitarium, which institution under his administration assumed a leading position among the private hospitals of the country.

He was a frequent and welcome contributor to the press. Amongst his more important contributions to general literature are: "Giles & Co., or Views and Interviews Concerning Civilization," a novel, illustrating some phases of heredity; "The Cliffords," a philosophical allegory, introducing impersonations of



DR. MATTHEW D. FIELD.

religion and science; "Facts and Fancies," in blank verse (a modern American epic); "The Lost Poet," a poem written for the Western Association of Writers, when he was over 70 years of age.

He was the author of numerous medical papers, published in *The American Journal of Insanity*, the *Cincinnati Lancet Clinic*, the *Journal of the American Medical Association*, etc.

He was an active member of the American Medico-Psychological Association, the American Medical Association, the Ohio State Medical Association, the Academy of Medicine of Cincinnati; also a companion of the Loyal Legion and a member of the Masonic order.

While occupying a position that tended to isolate the physician from the profession at large, he was remarkable for his active interest in medical progress and kept himself in touch with it through regular attendance upon the meetings of the societies to which he belonged.

One of the last acts of his professional life was to prepare a paper for the section on "Nervous and Mental Diseases" of the American Medical Association at its New Orleans meeting in May, 1903, which was published in the *Journal of the American Medical Association* for April 16, 1904.

In full consciousness that the end was near, he viewed the approach of death in the philosophical spirit in which he had lived, without regret for the past or fear for the future, manifesting to the last a thoughtfulness for the welfare of others and a kindly appreciation of the warm interest of numerous friends, whom he was unable to see in person. He died in June, 1903.

DR. MATTHEW DICKINSON FIELD.

Dr. Matthew Dickinson Field was born at Nashville, Tenn., July 19, 1853, and died at his residence in New York, March 9, 1895. He was the son of a noted civil engineer and the nephew of David Dudley Field and Cyrus W. Field, of New York, and Judge Stephen Field, of the U. S. Supreme Court. He prepared for Williams College at Monson Academy, and graduated from the former in 1875. He graduated in medicine at Bellevue Hospital Medical College in 1879, and was later an interne at Bellevue

Hospital. He was visiting physician at Charity Hospital for three years, and for two years was inspector in the Health Department of New York. In 1882 he was made examiner in lunacy for the Department of Public Charities, and in the following year became a surgeon of the Manhattan Railway Company. For 15 years he filled the responsible position of examiner in lunacy at the Insane Pavilion of Bellevue Hospital and examined about 2000 cases each year. He urged the establishment of a similar detention hospital in all large cities as a measure best calculated to regulate the proper commitment of the insane.

He was a member of the American Medico-Psychological Association, of the American Neurological Association and of many other similar societies. He died in consequence of disease of the heart after a long illness extending over many months. It was a matter of universal regret among his associates that his early death prevented him from publishing the results of his studies in connection with the large number of cases at the Bellevue Pavilion.

DR. LEANDER FIRESTONE.

Leander Firestone, surgeon and gynecologist, was born in Wayne County, Ohio, April 11, 1819. Brought up as an ordinary farmer's boy, he fought his way steadily forward, studying at night by the light of a burning brush pile until he was able to attend a few sessions of the district school, then securing such a school for himself, and finally saving sufficient money from his scanty earnings to attend medical lectures, first at the Jefferson Medical College, Philadelphia, and then in the Medical College of Cleveland. He graduated from the latter institution in 1841, and settled in Congress, Wayne County, near the place of his birth. In 1847 he became demonstrator of anatomy in the Cleveland Medical College, and occupied this position for six years. He was appointed superintendent of the Cleveland State Hospital in 1853 and served for three years. He was the first of the hospital political appointees in Ohio. In 1864 he became professor of obstetrics and diseases of women and children in the newly organized Charity Hospital Medical College in Cleveland and in 1866 was made professor of the principles of surgery in the same college. In 1879 he was once more transferred to the chair

of gynecology, in which he continued active until a short time before his death.

In 1878 he was appointed superintendent of the Central Ohio Insane Asylum at Columbus to succeed Dr. Richard Gundry, and managed to combine the duties of this position with those of professor in the Wooster Medical College. At the close of his connection with Wooster he was made professor emeritus, and in 1874 received the degree of LL. D. from the University of Ohio, located at Athens.

He died of apoplexy at Wooster, November 9, 1888.

Dr. Firestone was president of the State Society in 1859-60 and a member of the Boston Gynecological Society. In addition to his valedictory address to the Ohio State Medical Society, numerous papers from his pen are to be found in the pages of contemporary medical journals.

DR. EDWARD CARRINGTON FISHER.

Edward Carrington Fisher was born in Richmond, Va., in 1809, and died in 1890, at the age of 81 years, three score of which had been devoted to the relief and amelioration of stricken and suffering humanity. His career as a physician was begun in Richmond, from which place he went to Staunton, becoming assistant physician in the Western Lunatic Asylum, under Dr. Stribling.

When the State of North Carolina began to make provision for the care of the insane he was appointed superintendent of construction of the asylum buildings and began his duties upon the 1st day of October, 1853. At that time the massive stone foundations of the main building had been laid, and the walls of the central portion and north wing had been completed and covered. The main structure was completed under his direction, and while the original plan did not permit all that might have been desired architecturally in the finished edifice, it embodied the features most to be desired in a hospital building, viz. : sunlight and ventilation, and proved to be one of the best equipped institutions of the kind in the country. Throughout the construction the work of Dr. Fisher was characterized by prudent economy, conscientious care, and eminent faithfulness to the duties of his position.

On October 1, 1855, he became physician and superintendent of the North Carolina Insane Asylum. The first patient was admitted by him to the asylum on February 22, 1856, and was soon after discharged as cured. He held the position till July 7, 1868, when, during the period of "Reconstruction," he was displaced from political motives. He returned to Virginia, and about 1871 again became connected with the Western Lunatic Asylum. The "Reconstruction" turmoil, which agitated Virginia in 1881, again removed him from his active life work, but he was restored to his place in 1884, and remained there until his death.

DR. THEODORE WILLIS FISHER.

Dr. Theodore Willis Fisher was born in Westboro, Mass., May 29, 1837, and died October 10, 1914, after several years of invalidism. He was educated in the schools of Medway and Williston Seminary and Phillips Academy of Andover, and graduated at the Harvard Medical School in 1861. During the Civil War he was a surgeon of the 44th Massachusetts Regiment. In 1881 he was appointed superintendent of the Boston Lunatic Hospital, which position he resigned in 1895. For several years he was examiner for the Public Institutions Commissioner of Boston and committed most of the insane to the state insane hospitals from that city, and saw many cases of mental disease in consultation. Later he was appointed lecturer in mental diseases in the Harvard Medical School. In the seventies he was the leading expert in his branch in Boston and was frequently called on to testify as a witness in court. He was active in all matters concerning the welfare of the insane, and earnestly advocated a new hospital for the insane of Boston. He largely planned the Danvers State Hospital and the buildings first erected by the Boston Lunatic Hospital at West Roxbury. He belonged to many medical societies and had been a member of the American Medico-Psychological Association since 1881.

He was the author of a number of papers. Among these was one entitled, "Was Guiteau Sane and Responsible for the Murder of President Garfield?" published in the *Boston Medical and Surgical Journal* in 1888. He could speak with some authority on this subject, since he was employed as an expert in the Guiteau

trial. As showing his interest in medical progress, mention may be made of a paper he published in 1889 on "Cortical Localization and Brain Surgery," and also a paper on "The New Psychology," in 1893.

Until the last few years of his life Dr. Fisher continued to be prominent as an energetic worker in the field of mental disease. Unfortunately for his co-workers, he failed in health and was obliged gradually to relinquish the duties which he had performed so well.

DR. AUSTIN FLINT.¹

Dr Austin Flint was born at Northampton, Mass., March 28, 1836, and died on September 21, 1915. He was the son of Austin Flint, one of the most distinguished physicians of his time, and one of the great personalities in American medicine. The son, who was to become so widely known as a great physiologist, was a student at Harvard in 1852 and 1853, and received his professional education in the medical department of the University of Louisville and in the Jefferson Medical College, Philadelphia, from which institution he graduated in 1857, and later in 1885, received from the latter the honorary degree of LL. D. He began practice with his father in Buffalo in 1857, and removed to New York City in 1859. He was professor of physiology in the medical department of the University of Buffalo while he lived in that city and in the New York Medical College in 1859 and 1860.

In 1860 and 1861 he was professor of physiology in the New Orleans School of Medicine, and in 1861, at the age of 25, he became one of the founders of the Bellevue Hospital Medical College and professor of physiology in that institution, where he remained for nearly 30 years. He was also professor of physiology in the Long Island College Hospital from 1862 to 1868, and in 1898 became professor of physiology in the newly organized Cornell Medical College, becoming professor emeritus in 1896.

Dr. Flint was surgeon-general of the State of New York from 1874 to 1878.

In 1878 he was appointed a member of the consulting board of the then New York City Lunatic Asylum, and when this institution was taken over by the state in 1896 he was made president of the

¹ By Dr. William Mabon.

medical board, and continued as a consultant until the time of his death. He was president of the New York State Medical Association, 1895; member of the executive committee of the New York Prison Association, 1890; president of the Medical Association of the Greater City of New York, 1899, and was decorated with the order of Bolivar (third class) of Venezuela in 1891. He was a member of the following scientific organizations: The American Medical Association; the New York County Medical Association; the American Academy of Medicine (honorary); Association of Military Surgeons of the United States; American Association for the Advancement of Science; the Academy of Science, and the American Medico-Psychological Association, of which he became a member in 1899. He was also a member of the Century Association of New York.

He was the author of the "Physiology of Man" in five volumes; of a text-book of physiology in one volume; "Clinical Examination of Urine in Disease"; "Physiological Effects of Severe and Prolonged Muscular Exercise"; "Source of Muscular Power." Two volumes of his collected essays and articles on physiology and medicine were published. He made many other contributions to medical literature.

He was married at Ballston, N. Y., December 23, 1862, to Elizabeth B. McMaster, who survives him with their four children, one of whom, Dr. Austin Flint, Jr., is the fifth in direct line of physicians, all of whom have been leaders in the medical profession.

From the time of Dr. Flint's appointment as a member of the consulting board of the New York City Lunatic Asylum until his death he took great interest in the study of psychiatry, and in 1887 he attended for two courses the lectures of Dr. Carlos F. MacDonald on mental diseases given at the Bellevue Hospital Medical College. He was one of the noted experts in mental disease in New York, being associated in most of the important medico-legal cases coming before the courts of that state. His testimony was unusually clear, his presence on the stand most commanding, and "to the last he remained a man of active mind, of varied interests, alert, incisive, captious—he was indeed a personality."

DR. CHARLES FOLLIN FOLSOM.

Charles Follin Folsom was born in Haverhill, Mass., April 3, 1842, of sturdy stock, which came at an early date to New England and settled in New Hampshire.

His father was a clergyman and a graduate of Dartmouth College, and for many years a professor in the Theological School at Meadville, Pa.

His early boyhood was spent in Pennsylvania. He graduated at Harvard College in 1862, and entered at once upon service among the freedmen at Port Royal, S. C., where he remained for two years or until he was obliged to give up his work because of a gun-shot wound through his arm, and serious bodily disease which necessitated his retirement.

In 1865, by the advice of his physician, he made a long sea voyage to recover his health. When he returned to America he began the study of medicine in 1866. He graduated in 1869, and entered the City Hospital in Boston for a year's service. He engaged in private practice for two years but relinquished it in 1872 to accept a position as assistant in the McLean Asylum at Somerville, which he retained until the autumn of 1873, when he went abroad to study institutions for the insane in Austria, Germany, England and Scotland. During his absence in September, 1874, he received the appointment of secretary of the Massachusetts State Board of Health to fill a vacancy created by the death of Dr. George Derby, which he promptly accepted.

For the next two years his time was very busily occupied by the special sanitary work of the State Board of Health, and he could not until 1877 give particular attention to the duties of the state in relation to the general treatment of the insane. In this year he prepared for the report of the State Board of Health a long article entitled, "Diseases of the Mind," which was afterwards published in book form. It embodied the results of his studies abroad in a trip which he made in 1875.

In the following year he was offered the superintendency of the Danvers State Hospital and declined it. Although extremely busy, he devoted a certain amount of his time to private practice, especially among the insane, and was lecturer in the Harvard Medical School, first on hygiene and later on hygiene and mental

diseases, and finally as assistant professor in mental diseases from 1877 to 1888.

While secretary of the State Board of Health he was appointed, in 1879, a member of the Yellow Fever Commission, and in connection with the yellow fever epidemic of that year visited the Southern cities. In the same year the State Board of Health was abolished and a combined Board of Health, Lunacy and Charity was established. Dr. Folsom was made secretary of the new board, although he was not in sympathy with the movement and finally resigned his place in 1881.

In 1881, while a trustee of the Danvers State Hospital, he prepared and read an excellent paper on the management of the insane. During the same year he prepared another paper on the relation of the state to the insane.

In 1881 he was appointed physician to out-patients in the Boston City Hospital. In 1886 he became visiting physician for nervous and renal diseases. In the following year he became a member of the regular visiting staff, and during the closing years of his life made a successful effort to become a consultant in internal medicine. In 1891 he was chosen an overseer of Harvard College and served for 12 years. In 1896 he was appointed a member of a commission appointed by the Governor and Council to investigate the public charities and reformatory institutions of the state and to inquire into the feasibility of improving their methods and of revising the laws as to pauperism and insanity. This report, which covers 100 pages, was submitted in 1897.

In 1901 he was offered the chairmanship of the State Board of Lunacy but declined it. In 1898 he resigned his position as visiting physician to the Boston City Hospital and was appointed consulting physician in 1901.

In 1899 he had an illness following an accident in which he was thrown from his horse and sustained a fracture of the ribs which gave him pleurisy; from this time onward until his death it was apparent that he was not able to endure his former labors and responsibilities. In 1907 he went abroad for a visit of two months in search of rest and recreation, but was in ill health during most of the time. On his journey home he became delirious and on arriving in New York was taken to Roosevelt Hospital, where, after a serious illness of several weeks, he died August

20, 1907. An autopsy showed that he suffered from an ulcerative infective endocarditis, due to an old valvular disease of the heart.

He married, in 1886, Martha Tucker Washburn, but had no children.

His friends and patients to the number of 70 in the year following his death presented Harvard University with a fund of \$10,000 for the establishment in the Harvard Medical School of the "Charles Follin Folsom teaching fellowship in hygiene or in mental or nervous diseases."

He was a voluminous writer and published many papers upon nervous and mental diseases.

He was a member of many medical and learned societies.

DR. JOHN FONERDEN.

John Fonerden was born in the City of Baltimore in the year 1802.

In the earlier portion of his professional life he devoted himself especially to midwifery, and became, in this line, one of the most popular and reliable practitioners in the city of his residence.

In the year 1847 Dr. William Fisher, who had been for many years resident physician in the Maryland Hospital for the Insane, resigned his office. Dr. Richard Sprigg Stuart, Chairman of the Board of Visitors of that institution, tendered the position to Dr. Fonerden. In a letter to Dr. Stribling he gave the following reasons for his selection :

In selecting Dr. Fonerden, I was governed by my knowledge of his mind and heart. In morals, I knew him to be as perfect as a "true woman." His general acquirements well fitted him for the undertaking, but his own modesty and his deficiency in natural combativeness made him shrink from the idea. He had married a lively lady and had a small family, all equally repugnant to contact with the insane; nor could he be brought to consent, until I promised to provide for him a separate residence at some distance from the hospital. So diffident was he as to his fitness for the position, that he also stipulated for the privilege of resigning in a year if he could not become educated to it. In a few months, however, he grew familiar with his duties, and gave finally a striking proof of the power of mind over matter, for he undertook to brave the supposed dangers of a mad-house by the force of his will and a sense of duty. Cautious he always remained, but never terrified. He had a calm, benevolent, yet determined, expression of countenance that gave command to all around him, and seldom had he to resort to other means than personal manner to control

his subjects. Though his position was subordinate, the perfect harmony between his chief and himself made but one mind in operation, and for 22 years he had the unlimited control of the Maryland Hospital, and the highest confidence of its Board of Visitors.

Though Dr. Fonerden had passed his three score and five years, he was not worn out, and but for a local disability would probably have much longer discharged with energy and efficiency the duties of his position. For many years he had been inconvenienced by a scrotal hernia. Hydrocele, with varicose vessels of the spermatic chord, supervened. This complication interfered materially with his personal comfort, and, as he believed, impeded his usefulness. He thought of the surgeon's knife as affording the only remedy; he had consulted medical and other friends in Baltimore, and was advised against such resort. In April, 1869, he visited the Massachusetts General Hospital, at Boston, for an operation. He was discouraged by surgeons and friends from the undertaking, but he was determined to try the experiment, and an exploratory incision was made. Although a few cysts only were opened inflammation, followed by suppuration and gangrene, supervened, and he died May 6, 1869. He was one of the early members of the association.

DR. GEORGE W. FOSTER.¹

Dr. George Winslow Foster, superintendent of the Eastern Maine Insane Hospital, Bangor, Me., died January 4, 1904, in the 59th year of his age.

He was born in Burnham, Me., in 1845, but resided in Bangor from early childhood. He graduated from Bowdoin College in 1868, and received his medical degree from the same school in 1871. This excellent preparation he supplemented by post-graduate studies in Boston and New York.

Early in his career he became interested in psychiatry. He served as assistant physician at Taunton, Mass., and Concord, N. H., whence he was appointed an assistant in charge of the female department of the Government Hospital for the Insane at Washington, and filled the position for two years, from 1880 until 1882. On account of business interests and failing health he resigned to engage in private practice in Iowa, and later in Salt

¹ By Dr. I. W. Blackburn, Washington, D. C.

Lake City ; but in 1893 he accepted the position of assistant under Dr. Godding at St. Elizabeth, and remained in Washington until January 1, 1901, when he was appointed superintendent of the Eastern Maine Insane Hospital, which he opened July 1, 1901.

He was a man of high culture and excellent professional attainments ; tireless in the acquisition of scientific knowledge required in his specialty, and an extensive and discriminating reader. His contributions to medical literature were of high character. Among them were the following, published in recent years : "Hydric Treatment of the Insane" (with extensive bibliography) ; "Common Features in Neurasthenia and Insanity, their Common Basis and Common Treatment" ; "Responsibility in Mental Diseases" ; "School Life as Relative to the Developmental Period." He was a member of the American Medico-Psychological Association, the Maine Medical Association, the Penobscot Medical Association, the Medical Society of the District of Columbia, and of other scientific societies of Washington, and professor of nervous and mental diseases in the medical department of Columbian University, Washington, D. C.

DR. FRANCIS TAYLOR FULLER.

Francis T. Fuller was born in Granville County, N. C., June 14, 1835. His early education was obtained at the South Lowell Academy in Orange County. He taught school and later commenced the study of medicine under Dr. Hicks, of Oxford, and in 1854 attended the University of Pennsylvania, from which he graduated in 1856. In the same year he was appointed first assistant physician at the North Carolina Insane Asylum, and held the position until his death on the 14th of September, 1894. In 1882 he was made one of the directors of the State Hospital at Morganton, N. C., and held the position until 1889. He would have been elected superintendent of the institution if he had not preferred his position in Raleigh. He was a member of the Raleigh Academy of Medicine, of the North Carolina State Medical Society, of the New Jersey Medico-Legal Society, and of the American Medico-Psychological Association. He was universally esteemed and respected for his moral worth and intellectual culture ; socially he was pleasant, affable and courteous. He was un-

assuming in character and had an unselfish heart, and did many acts of charity in a quiet, unostentatious manner. His sympathetic disposition and his unselfish devotion to the work of his institution were generally recognized and appreciated throughout the state.

DR. SILAS FULLER.

Silas Fuller, M. D., was a native of Columbia, Conn., born in 1775. He practiced medicine there some years; was surgeon in the U. S. Army through the second war with Great Britain, and after its close continued to practice in Columbia until 1835, when he was appointed superintendent of the Retreat at Hartford, where he remained until 1840. Afterwards he continued to practice in Hartford until the time of his decease, which occurred October, 1847, aged 72. "His perceptive faculties were clear and accurate; his discrimination was excellent; his judgment sound; his sound common sense and good nature made him an acceptable visitor and pleasant companion. He was not unfeeling, and nature had made him to speak plainly and directly instead of in a round-about manner."

Dr. Fuller received the honorary degree of M. D. from Yale College in 1823. He was a member of the Tolland County Medical Society, and several times one of its fellows; was vice-president of the State Medical Society from 1834 to 1837; was president from 1837 to 1841. Dr. Fuller was a skillful surgeon and highly distinguished in general practice. He held various offices in Columbia, and represented the town in the State Legislature in 1806 and 1807, and was a delegate to the state convention in 1818, which formed the present constitution of the state.

He educated two sons as physicians: Warren A. Fuller, M. D., who practiced in Columbia and was a member of the Tolland County Medical Society and one of its fellows in 1831 and 1834; and Samuel B. Fuller, M. D., who located in Hartford. They were promising physicians, but died young.

DR. R. H. GALE.

Dr. R. H. Gale was born in Owen County, Ky., on the 25th day of January, 1828. Graduating when quite young from Transylvania University at Lexington, he first studied in the office of

his father, a physician, and later attended Jefferson Medical College in 1847 and 1848, graduating with excellent standing.

His first location was at Covington, Ky. While in this vicinity he became a staff officer of the Cincinnati Commercial Hospital. Subsequently he was induced by his family and friends to return to Owen County, in which he had been reared and where his professional capability and skill were recognized. Here he was twice elected to the office of County and Probate Judge. Subsequently he served one or more terms in the Legislature.

At the beginning of the Civil War he entered the service of the Confederate States in the regiment of Colonel D. Howard Smith, but his health failing, he was obliged to resign his position and to leave the service. After the war he settled in Louisville. Besides clinical teaching in the hospital he lectured for several seasons in the Louisville Medical College.

In 1873 he was appointed surgeon to the Louisville, Cincinnati and Lexington Railroad, and a year later to the Paducah Railroad. In 1879 he was appointed by Governor Blackburn superintendent of the Central Kentucky Lunatic Asylum, in which position he continued until his death.

In 1846 he married Miss M. C. Green, whose death in 1880 preceded his own. Only a few weeks before his death he married Mrs. Susan Bryant, who resided near Springfield, Ky.

Personally he was a man of commanding size, well proportioned and graceful. Socially he was genial and unreserved and excelled as an agreeable and entertaining conversationalist. He died at the residence of his son-in-law, Mr. J. C. Reid, in Owen County, near the place of his birth, on the 22d of April, 1883, in the 57th year of his age.

DR. ALEXANDER D. GALT.

Alexander, the son of Dr. John M. and Judith Craig Galt, was born at Williamsburg, Va., on December 27, 1777, his father being the chief surgeon of the military hospital located at Williamsburg during the Revolutionary War. He received his education at William and Mary College, and studied medicine for a time under his father, his professional education being completed in London, where, as a pupil of Sir Astley Cooper, he attended lectures at Guy's and St. Thomas' hospitals.

Returning to Virginia in 1796, he began to practice medicine in his native town and unremittingly performed its duties to the end of his life. He was made physician to the Hospital for the Insane at Williamsburg in 1800, and filled the position for 41 years.

He studied his cases with care, used judgment in the selection of remedies and kept notes of the history and treatment of cases and the results obtained. So accurately were these recorded that from them his son, Dr. John M. Galt, compiled and published in 1843 a work entitled, "Galt's Practice of Medicine."

He married, in 1812, Mary D. Galt, of Richmond, and had four children, two of whom, a son and a daughter, survived him. This son was Dr. John M. Galt, the second of the name, and a well-known alienist. In June, 1840, his health had become so enfeebled as to confine him to the house, but he saw patients in his room, his old patrons constantly applying to him for relief.

His last illness was characterized by much suffering, but in the intervals of freedom from pain he noted down his symptoms and the remedies used. On the 20th of November, 1840, he died and was buried in old Bruton Churchyard, near the graves of his parents.

DR. JOHN MINSON GALT.

It is not known when this surgeon of the Revolution was born, nor where he received his education, but he was a physician of eminence, and chief surgeon of a military hospital located at Williamsburg during the Revolutionary War. In 1795 he was appointed visiting physician to the Hospital for the Insane at Williamsburg, the first hospital of the kind to be established in this country, and filled the position until his death, which was held later by his son, Dr. A. D. Galt, and his grandson, Dr. John M. Galt. Beginning with James the first keeper, who was appointed in 1773, and ending with the death of Dr. J. M. Galt in 1862, the connection of the family extended over a period of nearly a century.

Dr. John Minson Galt died in 1808.

DR. JOHN M. GALT, JR.

A son of Dr. Alexander D. and Mary Galt, John M. Galt, Jr., was born in Williamsburg, Va., March 19, 1819, his first instruction being received from his parents and chiefly from his mother,

while he next went to the preparatory school of William and Mary College, and later entered the college, from which he graduated in 1838 with the degree of A. B. He read medicine under his father for a time, and then entered the University of Pennsylvania, receiving from this school his degree of M. D. in 1841.

He began to practice in his native town, and was almost immediately elected superintendent of the Hospital for the Insane, the office having been created by the Legislature in February, 1841. His term of service commenced on July 1 of that year. He filled this position over 20 years, and from the time of his election until his death devoted his entire time and attention to his duties.

Dr. Galt was a member of the Medical Society of Virginia and also a member of the Association of Medical Superintendents of Asylums, which became, 50 years later, the American Medico-Psychological Association. He was one of the early advocates of separate hospitals for the colored insane, a movement which originated with the late Dr. F. T. Stribling, superintendent of the Western Lunatic Asylum of Virginia.

He was a good classical scholar, and knew French and Spanish, and read the Koran in Arabic and wrote several books and many articles.

In person he was small in stature, of much good sense and, like his father, cared only for his work, nothing for money, refusing an increase of salary. His life was devoted to the care of the unfortunates under his charge. He never married, and died at Williamsburg on May 18, 1862.

For more than 25 years he kept a diary, in which was recorded much of interest and value. In 1843 he published "Galt's Practice of Medicine," which was compiled from notes and histories of cases left by his father. He published in 1843 a work entitled "Galt on the Treatment of Insanity"; in 1851, two essays on "Asylums for Persons of Unsound Mind"; in 1853, a second series on the same subject; in 1856, "Galt on Insanity in Italy," and in 1859, "Lectures on Idiocy." For medical journals he prepared many medical reviews and also wrote articles on botany. One manuscript, a "Life of Albert Galt the Sculptor," was written, but never published.

DR. CHARLES FREDERICK GILLIAM.

Dr. Charles Frederick Gilliam, superintendent of the Columbus State Hospital, died at that institution April 12, 1916, from injuries received in an automobile accident. He was born at Logan, O., in 1854, the son of William and Mary Gilliam.

When 12 years old he was forced to leave school and to secure work in a nail factory to help in the support of his family. He later was employed in iron mills and as a drug clerk. He studied medicine with his brother, Dr. D. Todd Gilliam, and in 1878 graduated with honors from the Columbus Medical College, afterwards taking postgraduate work in the medical department of Columbia University. He spent some time in Washington, D. C., first as clerk to the Committee on Pensions in Congress, then as special agent and statistician in the United States Department of Labor, and finally as Chief of a division in the Interior Department.

In the early 90's he resided at Newport News, Va., and was active in the organization of that place into a city corporation. He returned to Columbus, O., in 1896 and continued to be interested in civic and medical affairs.

During his incumbency as superintendent of the Columbus State Hospital the institution made marked advances along the lines of internal development. Many wards were remodeled and large sun porches erected. A well-equipped recreation hall was opened for both patients and employees. The connecting doors in many wards, as well as those of the sleeping rooms in the wards, were removed.

Early in 1914, by request of the Ohio Board of Administration, he prepared a large exhibit of pictures and charts giving views and statistics of the 18 institutions of the state. These charts, referring to methods of treatment, admissions, discharges, types of mental diseases, cost of maintenance, etc., were shown at the meetings of the Ohio State Medical Society and of the American Medico-Psychological Association at Baltimore.

He made many contributions to medical and popular literature, and wrote verse and short stories for magazines and periodicals, and two novels. He was a member of local, state and national medical associations and took an active interest in their welfare.

His administration of the state hospital was characterized by a feeling of good will between himself and his patients and employees by reason of his kindly nature.

DR. HENRY ARTEMUS GILMAN.

Henry Artemus Gilman, superintendent of the Iowa Hospital for the Insane at Mt. Pleasant, died suddenly October 9, 1898. He had been in his usual health and had no premonition of death. Without a moment's warning, he fell from his chair and before assistance could reach him was dead.

He was born at Gilmanton Center, Belknap County, N. H., on January 15, 1845, and received a classical education, graduating from the Gilmanton Academy in 1860 at the head of his class. In 1866 he graduated from Dartmouth Medical College, and in December of that year was elected second assistant physician of the State Hospital, at Jacksonville, and served for one and a half years. He then became first assistant physician, holding the position upwards of 14 years till July 25, 1882, when he was made superintendent of the Hospital for the Insane at Mt. Pleasant, where he served until his death.

Dr. Gilman was an authority on diseases of the mind and nervous system, and his professional opinions were highly regarded in the Northwest. He was a member of the commission to erect the new insane hospital at Cherokee, Iowa.

Owing to his careful study of the requirements of the insane of the state, his recommendations in the matter of appropriations to institutions had great weight with the Legislature.

His death was caused by overwork. For years he had charge of all the details of a vast institution, and recent events had greatly increased the strain upon him.

He was a member of the American Medico-Psychological Association, and at the meeting in St. Louis, Mo., in 1898, had been elected vice-president.

WILLIAM GODDARD.

William Goddard (1825-1907) became a trustee of Butler Hospital, Providence, R. I., in 1875 and was president of the corporation from 1894 till his death in 1907. His father was William G. Goddard, Professor of Belles-Lettres in Brown University, and his mother (Charlotte Rhoda) was a daughter of Thomas Poynton Ives. Mr. Goddard was a distinguished citizen of Rhode Island and gave generously of his wealth and energies to the service of the

institution which his kinsman, Nicholas Brown, had founded. His memory is perpetuated in the Goddard House of Butler Hospital, which he, together with a brother and sister, raised as a memorial to Thomas Poynton Ives Goddard, a deceased brother; in the imposing entrance gates to Butler Hospital, erected at his individual expense as a memorial to three generations of the Brown family; as well as in other tokens of a lively interest in all that concerned the welfare of the corporation which he so ably served.

DR. WILLIAM WHITNEY GODDING.

William Whitney Godding was born May 5, 1831, at Winchendon, Mass., the son of Dr. Alvah and Mary Whitney Godding, his mother's people having come from Whitney-on-the-Wye, Wales, in 1635 to Watertown, Mass.

In 1850 he entered the freshman class at Dartmouth College, graduating A. B. there and reading medicine with his father. His first course of lectures was at the College of Physicians and Surgeons in New York; the next at the Medical College at Castleton, Vt., where he took the degree of M. D.

He practiced with his father at Winchendon for 18 months, until he was appointed assistant physician at the State Hospital for the Insane, Concord, N. H., and until the close of his career devoted all his time and energies, with the exception of a single year, to the care of the insane. In 1862 he resigned his position at Concord to enter private practice at Fitchburg, Mass., but in September, 1863, entered the Government Hospital for the Insane, Washington, as second assistant physician, where he proved himself a man of great energy and industry, remaining very closely at the hospital and seldom leaving it to find recreation outside, except in long country walks, of which he was very fond. He was an omnivorous reader of books and was familiar with the best literature of the day. He had a facile pen and gave charming descriptions of cases of special interest.

His best known books were: "Two Hard Cases," Boston, 1882, and "The Rights of the Insane in Hospitals," Philadelphia, 1884.

In April, 1870, he was appointed superintendent of the State Hospital for the Insane, Taunton, Mass.

On September 23, 1877, Dr. Godding returned to St. Elizabeth

to take the place of Dr. Charles H. Nichols, the first superintendent of the government hospital. He died on May 6, 1899.

He was president of the American Medico-Psychological Association in 1889-90.

DR. WILLIAM B. GOLDSMITH.

William B. Goldsmith was born January 11, 1854, in Bellona, Yates County, N. Y., and graduated from Amherst in 1874, beginning the study of medicine under Dr. John B. Chapin with the object of becoming an alienist.

He graduated with honor from the College of Physicians and Surgeons of New York in 1877, and, after a short term in the Presbyterian Hospital, was appointed junior assistant in the Bloomingdale Asylum.

Wishing to enlarge his experience, he resigned in 1879, that he might work under Dr. Clouston in Edinburgh and also with Dr. Major at the West Riding Asylum. Two months more were spent in London with Hughlings-Jackson, when he returned to the United States and received an appointment as senior assistant at the Bloomingdale Asylum. In March, 1881, he accepted the position of superintendent of the Danvers Lunatic Hospital, where he remained until he again went to Europe to spend a year in study under Westphal, Krafft-Ebing and others.

He was made superintendent of the Butler Hospital for the Insane at Providence, R. I., in 1886, where he remained until his sudden death from pneumonia on March 21, 1888. He was unmarried.

DR. W. A. GORDON.

Dr. W. A. Gordon was born October 27, 1846, in New Athens, Ohio. He was educated in Washington and in Iberia College, Ohio, and was graduated from Rush Medical College in 1869. He settled in Oshkosh, Wis., where he practiced until 1895, with the exception of one year spent as first assistant physician at the Northern Hospital for the Insane at Winnebago, Wis., when it was first opened in 1872. From July, 1895, he was superintendent at the Northern Hospital until his death in October, 1909.

His life was a worthy example, seldom surpassed, of fidelity to duty, of devotion to right doing, and of consecration to the welfare of others.

His public career, like his private life, was worthy of imitation. He had a big heart and a big brain and was especially fitted for leadership. His sympathy was boundless, as shown by his practical efforts for the betterment of humanity. In his daily work as a physician, at the head of the charitable work of a county and later as the manager of a state institution, his heart went out to the poor and suffering, and his active brain sought to alleviate their condition and to improve their environment.

At the Hospital for the Insane at Winnebago he effected many marked changes for the better in the care and medical treatment of patients.

DR. WILLIAM ARTHUR GORTON.

William Arthur Gorton, physician and superintendent of the Butler Hospital at Providence, R. I., died at the Boston City Hospital May 1, 1899, after an illness of several months. An operation for gall-stones, successful in itself, failed to save his life, owing to an ulcer of the duodenum, whose existence had not been suspected.

He was born June 21, 1854, in North Brookfield, Madison County, N. Y., where members of his family still live. He was the son of Tillinghast and Adaline M. Rice Gorton. His early education was obtained in Brookfield and at Whitestown Seminary, an institution now extinct, but famous in its day for its excellent teaching. After graduating from the seminary in 1873 he entered the medical department of the University of the City of New York, at which institution he took his degree in 1876. Thereupon he entered Bellevue Hospital as a member of the house staff for 18 months. Later he engaged in practice in Cooperstown, N. Y., in association with Dr. L. H. Hills, now of Binghamton, N. Y. In June, 1878, he became assistant physician in the New York State Asylum for Insane Criminals at Auburn, N. Y. (now the Matteawan State Hospital at Fishkill-on-the-Hudson). After a service of three and a half years he was appointed assistant physician at the Danvers Lunatic Hospital, succeeding, in 1886, to the superintendency when Dr. Goldsmith became superintendent of the Butler Hospital. On the death of Dr. Goldsmith he succeeded again to his former chief's position, assuming charge

of the Butler Hospital in May, 1888. He married, June 8, 1887, Miss Mary Elizabeth Langley, of Danvers, Mass.

He had a remarkably retentive memory, a quick mental grasp, a gift of accurate analysis and an unusual power of concise and direct statement. This combination of qualities gave to his mind a legal cast, and admirably adapted him to be an expert witness in medico-legal cases, in which capacity his services were often sought.

DR. JOHN PURDUE GRAY.

John P. Gray was born in 1825 at Half Moon, Centre County, Pa. He received his collegiate education at Dickinson College, was graduated in medicine from the University of Pennsylvania, and subsequently took service in the Blockley Hospital. In 1850 he entered upon duty as third assistant physician in the Utica Asylum, and was rapidly promoted through the successive grades of second and first assistant, until in July, 1854, at the early age of 29 years, he was appointed superintendent of the institution.

In 1855 he became editor-in-chief of *The American Journal of Insanity*, the first and for some years the only journal in the world devoted to insanity and allied subjects. Under his charge it gained an enviable position, both in this country and abroad, and did much to advance American psychiatry and to improve the care and treatment of the insane.

Accepting unreservedly the view that insanity was a physical disease, the medical care of patients assumed the highest importance, and the institution became more completely than ever before a hospital for the care of patients as sick people. The influence of the predominant idea was felt in every part of the institution. He removed the insane of the violent and destructive class from strong rooms into the light and cheerful surroundings of the wards. Many were released from restraint, given the benefit of exercise in the open air and brought together at the table under proper supervision. Enlarged freedom and more personal care, owing to an increase in the number of attendants, effected a marked change for the better in their condition.

In carrying out the idea of hospital care, the sanitary and hygienic condition of the building early received deserved attention. He introduced into the institution steam heating and forced

ventilation by a fan, a system which was subsequently adopted in like institutions throughout the country.

During his long service he kept the institution in the van of progress and made it an acknowledged leader in methods of administration and a center of influence. Under his charge the Utica Hospital became a school of instruction and furnished a large number of men equipped for service in the specialty.

Following the example of his predecessor, Dr. Amariah Brigham, he soon gained the highest position in medical jurisprudence. His aid was often invoked in criminal and civil suits when the question of mental condition was involved. He was a witness in the most important cases in the state, and his opinion always carried great weight with the judiciary and juries. The trial of Guiteau, in which he carried the burden of the prosecution, and his subsequent injury from an attempted assassination are well remembered.

As a teacher he achieved an enviable success. He occupied for some years and up to his death the chair of psychological medicine and medical jurisprudence in the Bellevue Hospital and Albany Medical Colleges. His lectures attracted the students of his own college and crowded the room with those from other schools and with physicians in active practice.

He was made an LL. D. by Hamilton College; an honorary member of the psychological societies of Great Britain, of France and of Italy. He was president of the Association of Medical Superintendents of American Institutions for the Insane, of the New York State Medical Association, and held many other positions of honor and preferment.

Dr. Gray was a man of large frame and large heart, full of kindness and sympathy, and readily touched by the sufferings of others. He was a loving husband and an indulgent father. His kind words and pleasant ways always attracted the attention and called forth the affection of children. In conversation he was brilliant and instructive; his extensive travels and association with all conditions of men furnished opportunity for acquiring knowledge which his retentive memory enabled him to use for the gratification of his friends. He was a natural leader of men and would have reached the highest position in any walk of life.

Dr. Gray was a member of the Reformed Church for many years. In his religious views there were the same clear, decided convictions which marked his whole life.

He died January 12, 1886.

DR. THOMAS F. GREEN.

Thomas F. Green was born in Beaufort, S. C., December 25, 1804; he died in Midway, Ga., February 13, 1879, of apoplexy, while superintendent of the Georgia Lunatic Asylum. His parents were of the best class of Irish people. His father, a warm-hearted, highly-educated, enthusiastic young Irish patriot, joining in the ill-fated rebellion of 1798, was forced to flee the country; his wife, who was a Fitzgerald of noble blood, came with him to America. He had no fortune save his talents; no friends save those whom he won by his virtues.

He came to Beaufort, S. C., as a teacher. Here his eldest son, Thomas Fitzgerald, was born. He removed to Savannah, Ga., later, where he taught in a high school, and then to Athens, where he was elected a professor in Georgia University. He finally removed to Milledgeville, then the capital of Georgia, and here Thomas F. Green was educated. The latter was past his majority when he studied medicine and began to practice in Milledgeville, and was prospering as a physician, when the current of his life was changed.

A Northern philanthropist interested in the welfare of the insane visited Milledgeville to suggest and advocate the establishment of an asylum for them. He called a meeting of a few gentlemen of broad views and generous hearts, and laid his plans before them. Green became much interested in the project and gave it hearty support. He was connected with the successful effort to secure an appropriation from the Legislature for its establishment.

In 1846 he succeeded Dr. Cooper as superintendent of the asylum and continued in office for 33 years. The hospital was small when he assumed charge of it, but it grew to be one of the largest in the Southern States before his death. In person he was short, stout, of broad and humane countenance; in his youth, handsome; and in his old age, venerable. He was full of life,

cheerful, merry, courteous, considerate. He was a sincere Christian, in his home life, a model; one of the most benevolent and unselfish of men. He was devoted to the institution, and his success in the management of it was great. He was a delightful companion, a true and sympathizing friend, a man to be loved and honored.

DR. EUGENE GRISSOM.

Eugene Grissom, M. D., LL. D., was graduated from the University of Pennsylvania in 1858. He was some time president of the Association of Medical Superintendents of American Institutions for the Insane in 1887, and filled important official positions in the American Medical Association. He was vice-chairman of the Section on Mental Diseases of the International Medical Congress in Philadelphia in 1876. For 21 years (1868-1889) he was superintendent of the North Carolina Insane Asylum at Raleigh. He was also a member of the commission which located and constructed the insane asylum near Morganton, N. C. He was at one time a member of the North Carolina Legislature. In 1890 he removed to Colorado, where for some years he practiced as a physician, alienist and neurologist. On account of failing health he took up his residence in Washington with his son, where he died July 27, 1902. Among his more important contributions to medical literature may be mentioned the following: "The Borderland of Insanity," a paper on epilepsy; "Mania Transitoria"; "Mechanical Protection from the Violent Insane"; "True and False Experts"; "Deafmutism—Its Connection with Insanity"; "The Semeiology of Insanity."

DR. RICHARD GUNDRY.

Richard Gundry, M. D., was born at Hampstead, a village in the vicinity of London, Eng., October 14, 1830. His father, a clergyman, early gave his son a love of learning. At the age of 15 he came with his parents to Simcoe, Can., where, after a brief period of study in a Latin school, he was thrown upon his own resources. He obtained the means for his professional education by writing in an attorney's office. He began the study of medicine in Toronto, and graduated with honor in 1851 at Harvard Medical School, where he had the advantage of instruction from

and personal contact with such men as Oliver Wendell Holmes, Jacob Bigelow, John Ward and James B. Jackson. He settled in Rochester, N. Y., but soon was able by a fortunate legacy to travel abroad. Returning in 1853, he removed from Rochester to Columbus, Ohio, where he was appointed demonstrator of anatomy in Starling Medical College. In 1855 he was appointed a provisional second assistant physician in the Central Insane Asylum at Columbus, the earliest state institution in Ohio, to fill a temporary vacancy. His fitness for the work was so apparent, the temporary appointment soon became a permanent one. From 1855 to 1857 he was an associate editor of the *Ohio Medical and Surgical Journal*. In 1857 he was transferred to the Southern Ohio Asylum at Dayton as assistant physician, and became medical superintendent in 1861. In 1872 he was transferred to the South-eastern Asylum at Athens, Ohio, then in process of erection, to complete and prepare the buildings for occupation. In 1874 he was appointed its first medical superintendent, and retained the position until 1877, when he was transferred to Columbus, to complete and make ready for occupation the extensive new buildings. This position he held until May, 1878, when the exigencies of practical politics forced his resignation. The institution was "reorganized," in consequence of a vicious custom, to the end that its medical officers might be of the same political faith as the dominant party in the state.

After 23 years of faithful, devoted and self-sacrificing service to Ohio, in three of the asylums, he was forced to resign because his political affinities did not correspond with those of the newly elected Governor. To a sensitive, high-minded physician like Dr. Gundry the blow was a severe one. He was immediately appointed medical superintendent of the Maryland Hospital for the Insane at Catonsville, and held the position until he died. His change of residence to Maryland was most fortunate. He became one of a circle of high-minded, cultured and appreciative men, with whom his relations were most pleasant, and under the genial influences of whose companionship his mind was stimulated to new and fruitful effort. In 1880 he was appointed professor of mental and nervous diseases in the College of Physicians and Surgeons of Baltimore, and in the following year was elected professor of *materia medica* in the same college, and lectured

with great acceptance during the remainder of his life. In January, 1890, he suffered from a severe illness from which he never fully recovered. Although he performed his hospital work and lectured as usual, his labors cost him much effort. In March, 1891 he went to Atlantic City and for a time seemed to improve, but symptoms of Bright's disease developed, and it was evident that his days were numbered. In accordance with his earnest desire he was brought home and four days later passed away. He died April 23, 1891.

He had great intellectual grasp, and in debate could marshal his forces most effectually. The list of titles of his articles and addresses is a long one. Among the number are "Observations upon Puerperal Insanity," 1860; "The Psychical Manifestations of Disease," 1881; "The Care of the Insane," 1881; "Separate Institutions for Certain Classes of the Insane," 1881; "The Relations of the Powers of the State to the Rights of the Individual in Matters Concerning Public Health," 1883; "Valedictory Address to the Graduating Class, College of Physicians and Surgeons," 1883; "Some Problems of Mental Action," 1888; "The Care of the Insane," 1890.

In private life he was seen at his best. His rich stores of knowledge were poured forth freely in conversation, and he was equally at home in all fields. Without neglecting his scientific work, he was a devoted student of history and of English literature. Pure in life, an enthusiast in his chosen work, an able physician, a profound scholar, an affectionate husband, a devoted father, a steadfast friend—such was his character.

DR. MORRIS S. GUTH.

Dr. Morris S. Guth was born November 5, 1851, in Allentown, Pa. After attending the public schools in his native city he obtained his collegiate education in Muhlenberg College. He first graduated from the College of Pharmacy in Philadelphia, where he received the degree of Ph. G., and later from the Medical Department of the University of Pennsylvania with the degree of M. D.

When the new hospital at Warren, Pa., was nearing completion Dr. D. D. Richardson, who had been elected superintendent, chose him to be his first assistant.

After the retirement of Dr. Richardson from the superintendency of the hospital and the appointment of Dr. John Curwen, Dr. Guth continued as first assistant until 1900, when, upon the resignation of Dr. Curwen, he was appointed superintendent, filling that position acceptably until 1910, when he resigned to engage in private practice in Erie, Pa.

Immediately after leaving the hospital he visited Europe to secure much-needed rest and a freedom from care and responsibility. He returned to Erie and engaged in a consultation practice in nervous and mental diseases. He died unexpectedly March 26, 1912, in his 61st year. He was married.

DR. JOHN C. HALL.

John C. Hall, M. D., superintendent of Friends' Asylum at Frankford, Pa., died of neuralgia of the heart, July, 1893, after a brief illness. His general health, for some time impaired, had apparently been much benefited by a recent voyage to Bermuda.

He was born near Harrisburg, Ohio, March 12, 1843, of Quaker parentage. Carefully reared by religious parents, his early years were passed in the country. At the age of 20 he left home to attend Westtown Boarding School in Pennsylvania. After leaving school in 1866, he became a clerk at the Friends' Asylum at Frankford, and decided to become a physician. He discharged the duties of his office with satisfaction, and found time out of hours to prosecute his medical studies. He attended lectures at the University of Pennsylvania, where he graduated as Doctor of Medicine in 1868, and was appointed an assistant physician in the Philadelphia Dispensary, where he served one year. Upon the expiration of his dispensary service he was appointed, after a competitive examination, a resident physician of the Philadelphia Hospital. This service, with its associations, was of great benefit to him in after years. His dispensary and hospital experience covered nearly two and a half years. In 1870 he settled in Frankford, to engage in the general practice of medicine, and soon received an appointment as visiting surgeon to the Jewish and Episcopal hospitals.

During these years he retained his interest in the Friends' Asylum and frequently came in contact with the superintendent,

Dr. Joseph H. Worthington. In April, 1876, he was appointed an assistant physician, and in the following year, upon the resignation of Dr. Worthington, he was made superintendent and physician-in-chief, a position which he held for 16 years, or until his death.

He was a member of the Society of Friends and of the American Medico-Psychological Association, the Philadelphia College of Physicians, the American Medical Association, the Philadelphia County Medical Society, the Philadelphia Neurological Society, the Pennsylvania Historical Society and the Art Club of Philadelphia.

DR. WINTHROP BAILEY HALLOCK.

Winthrop Bailey Hallock died of apoplexy at the Manhattan Hotel, New York, September 24, 1898. He was born in Utica, N. Y., February 2, 1838. He was educated at Jamestown, N. Y., and studied medicine at the University of New York and the Long Island Hospital Medical College, graduating from the latter in 1864.

He married, January 20, 1858, Mary Kirkwood, of Concord, N. H.

From 1862 to 1865 he served as medical cadet and assistant surgeon in the U. S. Army, and was stationed at hospitals in New York, David's Island, and Fortress Monroe, Va.

After the war Dr. Hallock returned to Jamestown. Later he went to New York and began practice with his uncle, Dr. Robert T. Hallock.

In 1867 he accepted the position of first assistant physician in the Connecticut Hospital for the Insane at Middletown. He remained there until 1877, when he established Cromwell Hall, a sanitarium for nervous diseases, at Cromwell, Conn.

He was a member of the American Medico-Psychological Association, the New England Psychological Association and the Connecticut Medical Society.

His wife and two children, Dr. F. K. Hallock, of Cromwell, and Mrs. W. P. Couch, of Dubuque, Iowa, survive him.

DR. HENRY MILLS HARLOW.

Dr. Henry Mills Harlow was born in Westminster, Windham County, Vt., April 19, 1821, and died in Augusta, Me., April 5, 1893.

He was fortunate in inheriting from both parents a most excellent physical and mental constitution, made more vigorous by his early life upon his father's farm. Much of his minority was spent in farm work, yet he found time to attend the district schools, and at 17 years of age he entered the Ashley Academy, Ashley, Mass., where he remained several terms, and subsequently studied at Burr Seminary, Vermont. At an early age he began to teach school, and during college vacations he devoted his entire time to teaching. In 1841 he began the study of medicine with the late Dr. Alfred Hitchcock, of Ashley, Mass. In 1842 he attended lectures at Harvard. In 1843, under Prof. Rush Palmer, he attended lectures at Woodstock, Vt., and later at the Berkshire Medical School at Pittsfield, Mass., where he graduated.

Upon his graduation he was appointed an assistant physician at the Vermont Asylum at Brattleboro, then under the superintendency of Dr. William H. Rockwell.

In the spring of 1845, upon the resignation of Dr. Isaac Hall, then superintendent of the Maine Insane Hospital, he was appointed assistant physician under Dr. James Bates, Dr. Hall's successor. He there entered upon his life work, which covered a period of nearly 40 years.

He ably filled the position of assistant physician until the disastrous fire during the winter of 1850 destroyed almost the entire hospital. After this fire the superintendent was instructed by the trustees to visit the various hospitals in the New England and Middle States to ascertain improved methods of construction. This procedure left Dr. Harlow as acting superintendent, and upon the resignation of Dr. Bates, a few months subsequently, he was appointed his successor, and held the position for 33 years.

The demands made upon his physical and mental strength were excessive in rebuilding and reconstructing the new institution from its former ashes. Although the labor was great, with courage and in the face of many obstacles he commenced his task, and for 20 years his energies were entirely engrossed in provid-

ing increased accommodations for the treatment of patients by the construction of additional wings and in the introduction of new methods of heating and ventilation.

Possessing indomitable energy, keen perception and a sympathetic nature, he was exceedingly qualified to care for the insane. He was kind yet firm in his discipline, and impressed his patients with the belief that he was seeking their best good, and held their respect and love.

GEORGE L. HARRISON.

George L. Harrison, Esq., of Philadelphia, was born in 1812 and died in 1885, at the age of 73 years. Originally educated as a lawyer, he soon became a sugar refiner and merchant, and amassed a large fortune, which enabled him to devote his later years to philanthropic work. He was appointed a member of the Board of Public Charities of Pennsylvania, and for many years was its president. In the performance of the duties of this position he displayed great zeal and energy and breadth of vision.

The list of his published writings is a long one. He wrote on "Compulsory Education"; "Prison Discipline"; "Benevolence in Punishment"; "Provision for the Poor"; "Crime and Public Economy"; "Prison Reform"; "Insane Hospitals"; "Provision for Insane Poor," etc. His most elaborate work, however, was "Legislation in Insanity," a volume of 1100 pages, containing a compilation of the statutes regarding the lunacy legislation of the United States, Canada, England, France, Germany and Russia. This was compiled by himself, and the expenses of collecting material and publishing and distributing the bulky volume were also borne by himself personally. The appendix containing the report made by the commission appointed by Governor Hoyt gives an excellent impression of the sympathetic and far-seeing character of his efforts to improve the condition of the dependent insane.

In 1881 he was appointed a commissioner by the Governor of Pennsylvania to visit England to arrange for the transfer of the remains of William Penn to Philadelphia. Although, owing to the objections of the descendants of Penn, he did not succeed in his mission, he won the respect of all by his cautious handling of the matter. In his memory his son, C. C. Harrison, provost of the University of Pennsylvania, established "The George Leib Harri-

son Foundation for the Encouragement of Liberal Studies and the Advancement of Knowledge" to provide fellowships and scholarships for the University of Pennsylvania, with an endowment of \$500,000.

DR. J. C. HAWTHORNE.

Dr. J. C. Hawthorne, of the Oregon Asylum for the Insane, died of apoplexy on Tuesday, February 15, 1880, at the age of 61. He was born at Meadville, Pa., March 12, 1819. In 1850 he went to California, and in the year following commenced the practice of medicine in that state.

In 1857 Dr. Hawthorne removed to Portland, Ore., and in 1858, associated with Dr. A. M. Loryea, assumed charge of the County Hospital. Subsequently they took care of the insane of Oregon, by contract, an arrangement which continued in force for several years.

He was engaged in the care and cure of the insane of Oregon for a period of 20 years, and while he had a large pecuniary interest in his contract with the state, he never let this fact interfere with his duty towards those under his charge. Always loving, kind and gentle, he was especially generous and liberal in providing means for lightening the burden caused by disease, and when he died his former patients mourned him as one who could not be replaced.

THOMAS R. HAZARD.

Thomas Robinson Hazard (Shepherd Tom), the grandson of "College Tom" and son of Rowland Hazard, of Peace Dale, R. I., was born January 3, 1797.

He was sent to Westtown School, a Quaker school near Philadelphia, for three years, from 1808 to 1811.

After his return from school to Peace Dale he used to ride about the countryside on horseback, distributing carded bats of wool and collecting the yarn spun from it, to be woven in the mill at Peace Dale. He thus became intimately acquainted with the whole district, and developed powers of close observation. In 1821 he established a woolen mill, which he conducted with so much ability that he was able to retire from business with a competency 17 years later. He had a quick sympathy with the

needy and neglected. After meeting with certain eminent philanthropists, among whom was Dorothea Dix, then becoming active with regard to the condition of the insane, he vigorously took up the question of the condition of the insane, and in 1851 in a report on this subject forcibly set forth the congested condition of the poor in the almshouses in the State of Rhode Island and the terrible neglect of the insane and imbecile. His report is a model of thoroughness and had great influence upon the public and accomplished much for the better care of the insane in Rhode Island.¹

In 1838 he married Frances Minturn, and settled at Vaucluse, near Newport. After the death of his wife in 1854 he turned to Spiritualism for comfort and became a liberal contributor to that faith. He died in New York, March 26, 1886.

He was always an active pamphleteer, and continued his literary activity throughout his long life. His best known books are entitled "Recollections of the Olden Time, etc.," and "The Jonny Cake Papers," both containing records of local history and tradition of great interest and merit. He also wrote a series of papers which he afterwards published under the title, "A Constitutional Manual: Negro Slavery and the Constitution," upon the model of Washington's Farewell Address. The *Providence Journal* in 1878 said that he had rendered four distinguished services: First, his labors in behalf of the poor and insane; second, his successful campaign against capital punishment; third, his advocacy and support of African colonization; fourth, the origination of the movement to relieve the Irish famine.

DR. FRANK CRAMPTON HOYT.

Frank Crampton Hoyt was born in Denver, Colo., November 17, 1859. He graduated in medicine at the College of Physicians and Surgeons at St. Joseph, Mo., in 1881. Afterwards he pursued a course of study in pathology at the University of Kentucky at Louisville. He founded and edited the *St. Joseph Medical Herald*. He had a scholarly mind and a talent for writing, as was shown by the numerous papers which he read before medical societies and his reports as superintendent of the hospitals at

¹ This report will be found in an appendix to the "History of the Care of the Insane" in Rhode Island, Vol. III, page 572.

Clarinda and Mt. Pleasant. In September, 1887, he was appointed third assistant physician in charge of pathology at the state hospital at St. Joseph, Mo. Here for a period of nearly six years he carried on the work of the pathological department systematically and efficiently, obtaining and carefully studying much valuable material. As a result of these studies he published subsequently papers on "Pachymeningitis Hemorrhagica," "Tropho-Neuroses in the Insane," and "The Tropho-Neuroses of Paretic Dementia."

In 1893 he was appointed medical superintendent of the Iowa State Hospital at Clarinda, and his administration of the institution was most successful. While in Clarinda he organized an excellent band to furnish out-of-door music in summer and an orchestra for indoor and winter evening entertainment. He also inaugurated a military drill for patients under a competent drill-master. He also carried on mechanical industries for patients, such as manufacturing clothing, shoes, brushes, brooms, furniture of all kinds, to a greater extent than any other state hospital of equal size; in addition, farm and garden operations were largely engaged in.

In September, 1898, he resigned and removed to Chicago, but was almost immediately recalled to Iowa to assume charge of the Hospital for the Insane at Mt. Pleasant, owing to the death of Dr. H. A. Gilman. His administration at Mt. Pleasant was also successful. He introduced many improvements, such as forced ventilation, electric lighting, new and larger kitchens, an associate dining room and an ample water supply.

He married in 1883 Miss Mattie Price Garner, of Richmond, Mo., who, with three children, survived him.

He died suddenly in Kansas City, May 21, 1901.

DR. DANIEL E. HUGHES.

Dr. Daniel E. Hughes, who died October 27, 1902, after a service of 12 years at the Philadelphia Hospital as resident physician-in-chief, both of the hospital and of the insane department, was an efficient and zealous official, whose untiring work will long be gratefully remembered. He had great executive ability and was blessed with an insight into character which enabled him

to develop the best energies of the resident physicians and other officers who worked under him and with him. He was graduated from Jefferson Medical College in 1878. He was the author of a compend of the practice of medicine, which passed through numerous editions. He filled his difficult position to the satisfaction of the Bureau of Charities, and also won the respect of the medical staff; by his patients he was affectionately regarded as a friend and helper. A tablet in bronze, commemorative of the worth of Dr. Hughes and of his service to the Philadelphia Hospital, was placed in the hall of the administrative building on December 27, 1904, with suitable exercises.

DR. EDWARD REYNOLDS HUN.

Edward Reynolds Hun, Albany, N. Y., son of Dr. Thomas Hun, of Albany, was born in that city April 17, 1842. He was educated at the Albany Academy; at Churchill's School at Sing Sing; at Dummer Academy, Byfield, Mass., and at Harvard College (class of 1863), and studied medicine in Albany Medical College, and in the Medical Department of Columbia University, where he graduated in 1866. Subsequently he visited Europe and continued his studies in London and Paris. On his return he settled in Albany and engaged in general practice. He was elected a member of the Albany Medical Society in 1867; of the American Medical Association in 1870; and of the Medical Society of the State of New York in 1873, of which he was secretary in 1875; of the New York Society of Neurology and Electrology in 1873; of the New York Neurological Society in 1874; and of the American Neurological Society in 1876. In 1875 he was elected to the chair of nervous diseases in the Albany Medical College. He translated Bouchard's "Secondary Degenerations of the Spinal Cord," 1869, and was the author of "Trichina-Spiralis," 1869; "Pulse of the Insane," 1870; "Hæmatoma Auris," 1870, and various contributions to medical journals. He held the position of attending physician of St. Peter's Hospital, and since 1876 that of physician to the Albany Hospital. He was appointed special pathologist to the New York State Lunatic Asylum at Utica in 1868 and held the position until 1873, when he resigned to connect himself with the

chair of nervous diseases in the Albany Medical College. In April, 1874, he married Caroline de Forrest Gale, of Troy, N. Y.

His health soon failed and for some years he was unable to follow his profession. He died March 14, 1880.

ROBERT HALE IVES.

Robert Hale Ives (1799-1875), charter member of the Board of Trustees of Butler Hospital, Providence, R. I., and continuously its secretary till his death, was the son of Thomas Poynton and Hope Brown Ives, his mother being the daughter of Nicholas Brown, founder of the hospital. He was a liberal contributor to the institution and his memory endures in the Robert Hale Ives Beneficiary Fund of over \$66,000, as well as in other benefactions.

DR. EDWARD JARVIS.

Dr. Edward Jarvis was born in Concord, Mass., on January 9, 1802. He graduated at Harvard College in 1826 and took his degree in medicine in 1830. He practiced medicine two years in Northfield, Mass., five years in Concord, Mass., and five years in Louisville, Ky., with but moderate success. His tastes inclined to the study of mental science and anthropology. He was early interested in the cause of education and started public libraries in Concord and Louisville. In 1836, while at Concord, he received an insane young man from Cambridge into his house for treatment. Several other patients were afterwards received for the same purpose, and he became interested in the treatment of insanity, which specialty he resumed when he established a permanent home in Dorchester and continued it for many years successfully. Dr. Jarvis was disappointed several times in his candidacy for the superintendency of public hospitals for the insane in Massachusetts, a position for which he brought the highest recommendations and towards which his tastes were strongly inclined. Although he felt these disappointments keenly, he was not deterred from pursuing his favorite studies as far as possible in the community at large.

In 1840 his attention had been directed to the apparently excessive amount of insanity among the free colored population of the North. This excess, which had been used by speakers in Con-

gress to show the probable effect of emancipation upon the negro, he pointed out to be due to gross errors in the census of 1840. His aid was accordingly solicited in the preparation of the census of 1850, and although without official authority and pecuniary return, he gave one-third of his time for three years to perfecting the returns. In 1874, however, the government acknowledged his merits by paying him for this service. He was also employed on the census of 1860, and became the leading authority on vital statistics, being recognized as such at home and abroad.

In 1854 the Legislature of Massachusetts appointed a commission, consisting of Levi Lincoln, Increase Sumner and Edward Jarvis, to inquire into the number and condition of the insane and idiots in Massachusetts, and the report of that committee, prepared by Dr. Jarvis, is a monument of his laborious zeal and patient, painstaking investigation into the number of the insane and idiots in Massachusetts. The hospital at Northampton was erected in consequence of their recommendations.

In 1843 he became a member of the corporation of the School for Idiots in Boston, and in 1849 was appointed physician to the Institution for the Blind. He continued to be associated with Dr. S. G. Howe in the supervision and care of these two institutions for many years, his service being largely gratuitous.

In 1860 Dr. Jarvis visited Europe, where he traveled extensively in charge of a wealthy insane patient, who was accompanied by his family. He was commissioned a delegate to the International Statistical Congress in London, where he made the acquaintance of many distinguished foreign physicians and alienists. He was chosen one of the two vice-presidents of this congress. In 1874 his labors were suddenly arrested by a stroke of paralysis. He remained in comfortable health, however, until October 20, 1884, when a second attack occurred, which terminated fatally on October 31, 1884. His wife died the second day afterwards, and they were both buried on the same day, in their native town of Concord.

Dr. Jarvis' writings were voluminous and embraced a wide range of subjects. His papers on vital statistics, hygiene and insanity number over 150. He wrote also a school physiology, which was translated into Japanese and is in use in Japan.

He was a member of many learned societies. Of a genial, kindly, social disposition, he was always ready to impart the treasures of his mind, well stored with various knowledge, to those who met him. He was always a scholar, absorbed in the consideration of important and beneficent schemes, and, while constantly seeking information from others, he was ever ready to share what he possessed with them.

DR. GEORGE FREDERICK JELLY.

Dr. George Frederick Jelly was born in Salem, Mass., January 22, 1842. He was graduated from Brown University in 1864, receiving the degrees of A. B. and A. M. and in 1907 that of D. Sc. He graduated from the Harvard Medical School in 1867 and was house officer at the Boston City Hospital in 1868. He then began private practice in Springfield, Mass., but in 1869 received an appointment at McLean Hospital, and in 1871 was made superintendent, when only 29 years old. He resigned in 1879 and entered private practice in Boston as a specialist in mental diseases and gained an important place in the community. He was appointed examiner of the insane for the city, a position which he continued to fill until shortly before his death. When the State Board of Insanity was organized in 1898, he was unanimously selected chairman and held that position till 1908, when he resigned because of failing health. He was a diligent worker in the cause of the insane in all its details.

Dr. Walter Channing says of him:

Dr Jelly's services were extensively sought as a consultant and as expert in court. He was thorough and deliberate in forming his opinions and absolutely honest and fearless in his expression of them, and was always true to his convictions. As a result, he gradually acquired the reputation of a man without fear and without reproach, whose judgments were sound and reliable. He was the most gentle, loyal and tender of physicians and friends, always anxious to serve and expecting nothing in return. His life was a continual glad sacrifice to duty, and he broke down under the strain and died.

He is remembered at McLean Hospital as the first superintendent to place women nurses on the men's wards, and as one of the best loved by the patients of any physician ever in its service.

He died October 24, 1911, in the 70th year of his age.

DR. WILLIAM PALMER JONES.

William Palmer Jones, M. D., was born in Adair County, Ky., October 17, 1819, and died at his residence in Nashville, Tenn., September 25, 1897. His father, William Jones, of Welch descent, was a native of Lincoln County, Ky., and died in Adair County, Ky., in his 42d year. His mother, Mary B. Powell, a daughter of Robert Powell, a farmer, and a major in the army of the Revolution, was born in Virginia. Her mother was a Miss West, a relative of the family of the painter, Benjamin West. There is an aristocracy of birth, an aristocracy of training and an aristocracy of worth, and Dr. Jones possessed all of these.

His mother, left a widow with nine children dependent upon her, devoted herself to their care until her death in Bowling Green, Ky., in 1851, at the age of 45. That she was a true mother the subsequent career of her noble son well shows.

His literary education was limited to occasional attendance, when time and means permitted, upon the "old field schools" of Kentucky, but with the indomitable will of an earnest nature he made the best of his limited advantages. Before attaining manhood he determined to study medicine, and after two years' office tutelage under Dr. T. Q. Walker, he attended a course of lectures at the Louisville Medical College, and later received the degree of Doctor of Medicine from the Medical College of Ohio and from the Memphis Medical College.

He commenced the practice of medicine in 1840 in Edmonton, Ky., before he was 21 years of age. Later in the same year he moved to Bowling Green, where he remained until 1849, when he went to Nashville, Tenn., where for nearly half a century he led an eventful and most useful life. In 1862 he was appointed superintendent of the Central Hospital for the Insane near Nashville, remaining in office until he resigned in 1869. He was a member of the American Medical Association, of the state, county and local medical societies, of the American Medico-Psychological Association and of the American Association for the Advancement of Science. In legislative halls, both state and municipal, in the councils of his church, and in the hearts and minds of admiring friends of all political opinions he held an honored position.

DR. ELI EDWARD JOSSELYN.

Dr. Eli E. Josselyn, assistant physician at the Pennsylvania Hospital, West Philadelphia, died suddenly at that institution September 13, 1903, in the 59th year of his age.

He was born in Plymouth County, Mass., and was educated in the common schools of the state. Early in life he lost his mother, and his young boyhood days were spent under the care of his maternal grandmother, a New England woman of the Puritan type, who left upon him the influence of her teaching and example.

He received his medical education at the University of New York and was graduated in 1873.

He was first connected with the Hospital for Crippled Children in New York, where he did good work under the late Dr. James Knight. Though his subsequent career was mostly spent in another department of medicine, he never lost interest in orthopedic surgery. In 1879 he received a provisional position at the Utica State Hospital, and in the following year was given a permanent appointment. In December, 1883, he resigned to enter upon private practice. He was later connected with the private institution of Dr. Patterson, at Batavia, Ill., and since 1886 had been permanently in service at the Pennsylvania Hospital, first in the department for men and afterwards in the department for women. He attracted and held friends, although somewhat quick and brusque in manner, with strong likes and dislikes and even prejudices. He was a man of unusual character and of strong individuality. With a more liberal education, the lack of which he always deplored, he would have been regarded as a brilliant man.

He was a lover of nature, and flowers and trees and growing things were his delight. He had the instincts of a poet, and if he had turned toward descriptive writing he might have won distinction. He was generous and charitable, and in a quiet way used his means for the good of others.

He possessed strong religious faith, and his daily life was one of strict honesty and uprightness.

DR. ABNER OTIS KELLOGG.

Abner Otis Kellogg was born in Madison County, N. Y. After an academic education he received his medical training in the Berkshire Medical College in Massachusetts. He began the practice of medicine near Port Hope, Ont., where he gained a widely extended practice, traveling chiefly on horseback to visit his scattered patients. Through an accident requiring his professional aid he made the acquaintance of an officer of the Canadian Pacific Railroad survey, with whom he afterwards made an extensive tour of Europe, thereby adding largely to his professional equipment. In 1861 he was called to the post of second assistant physician in the New York State Lunatic Asylum, then under the superintendency of Dr. Gray. While in this position he made many contributions to the *Journal of Insanity*, which gained him considerable reputation, both from a medical and literary point of view. Some of these he afterwards published in a volume entitled "Shakespeare's Delineations of Insanity, Imbecility and Suicide." He also made other valuable contributions to medical journals, and was frequently called as an expert witness in the courts.

He removed to the Hudson River State Hospital in 1870 as first assistant physician, which position he held until 1884, when he resigned and removed to Canandaigua, and later to Kentland, Ind., where he died at about the age of three score years and ten, September 21, 1888. He was a man of deep and devout feeling, genial and amiable to all with whom he came in contact; and withal a man of clear, definite opinions and tenacious of his convictions.

DR. ISAAC NEWTON KERLIN.

Isaac Newton Kerlin was born in Burlington, N. J., May 27, 1834. He was educated in the public schools and in the John Collins Academy in his native town, and studied medicine under the preceptorship of the late Dr. Joseph Parrish, graduating from the University of Pennsylvania in 1856. He was appointed resident physician at Wills Eye Hospital in 1857, and from there went to the assistant superintendency of the Pennsylvania Training School for Feeble-minded Children, then in its infancy, in October, 1858. He enlisted in the army in 1862, when Lee's

army threatened the North, but was later called from the ranks by Surgeon General H. Smith and placed in charge of the night work of an improvised hospital at Hagerstown, Md., where he gave faithful and efficient service. Later he was entrusted by Medical Director A. K. Smith with the removal of the wounded to Chambersburg, Harrisburg and Philadelphia. From here he was sent by the U. S. Sanitary Commission to Suffolk, Va. Later he was placed in charge of the field work of the Sanitary Commission of the Army of the Potomac, then badly in need of reorganization, where he remained until after the battle of Chancellorsville in May, 1863, winning the approval of the commission by his organizing ability, courage and energy. In November, 1863, he was recalled to the Pennsylvania Training School to be superintendent. He took up the work at a discouraging time, when the attention of the public was occupied by the war, and funds, either from public or private sources, were difficult to obtain. He early saw, with his fellow superintendents, that without association and intercourse the best results could not be obtained, and at a meeting at Elwyn in 1876, at which Drs. Seguin and H. B. Wilbur of New York, Doren of Ohio, Knight of Connecticut, Brown of Massachusetts, and T. Wilbur of Illinois, were present, a national association was formed with Dr. Seguin as president and Dr. Kerlin as secretary, an office which he held almost uninterruptedly until his death. Other members were rapidly added, and the association soon included all in the country who were prominent in the care, training and education of the feeble-minded.

He also recognized that institutions were not solely for the care of children, that measures of prevention were necessary to diminish the burden upon the public, and that such measures could be efficient only when based on a sure knowledge of the conditions underlying idiocy. This knowledge must be obtained through clinical and pathological research. In 1882 an effort was made to have a pathologist appointed to study such material as might be furnished by the different institutions, but this plan of joint work was not feasible and was abandoned. He began, however, a series of autopsies at the Elwyn institution, and accomplished considerable work during his lifetime, laying a foundation for much more in the future. He believed that the feeble-minded of all grades were the wards of the state and early advocated the erection of

detached buildings adapted to their comfortable and economical care. In the spring of 1883 the first of these buildings was opened for 112 children. At the close of his labors, besides the central school department buildings providing school rooms and accommodations for 400 feeble-minded children of the teachable class, there stood also, on the grounds at Elwyn, four detached buildings accommodating 400 children of the custodial and unteachable class. As his work reached the limit he had set for thorough and economical management his labors began to show their effect upon his health and strength. The trustees of the institution, appreciating his services, gave him liberal time for recuperation; but the resolute energy which had characterized his life allowed him to be happy only when busy, and he struggled for four years with the combined cardiac and renal disease which during this period threatened his life.

He married in 1865 Miss Harriet C. Dix, of Massachusetts, whose cordial aid and sympathy were acknowledged factors in his success.

He was prevented by the numerous cares of a rapidly growing institution from writing any extended work on juvenile mental defects. His numerous short articles were characterized by profound knowledge of his subject, a ready wit, and a striking originality of expression, which made them not only instructive but entertaining and held the interest of the reader to the end. He published a paper on classification of the feeble-minded based upon their mental powers. He also issued a statistical paper on the causation of idiocy, based on a critical examination of 100 cases. As secretary of the National Association, he was in close association with specialists abroad; he spent the summer of 1889 in examining foreign institutions to acquire new ideas for his work at Elwyn.

The loss of his wife in December, 1892, to whose tender care he owed much of the conservation of his strength, was a sore blow. As the warm weather of 1893 advanced he did not rally as he usually did through the summer months. He died October 25, 1893. He was buried, at his request, in a beautiful grove on the grounds of the charity in whose creation he had taken so active a part. His name and his fame have grown with the buildings on the Elwyn grounds, and they are his monument.

DR. EDWIN ARIUS KILBOURNE.

Dr. Arius Kilbourne was born in Chelsea, Vt., March 12, 1837. When he was 5 years old his family removed to Montpelier, where he attended school and academy until he was 18. In 1857 he joined an older brother, a dentist in St. Johnsbury, and began the study of medicine, which he continued with various interruptions, one of them being notably his three years' service in the Civil War, until 1868.

He first entered the three months' service. After being mustered out in June, 1861, he again volunteered and went as captain in the 9th Vermont Regiment, in which he served until his health failed, and he resigned near the close of the war. During the winter of 1864-65 he attended the Georgetown Medical College, at Washington, D. C. The next year he spent at the University of Michigan, at Ann Arbor, and the following year in New York, where he graduated at the College of Physicians and Surgeons in 1868. He became an assistant physician in the New York City Asylum, and devoted his attention to insanity and nervous diseases. He next, through a competitive examination, secured the position of house physician and surgeon at the Brooklyn City Hospital. He later became surgeon on the "Black Ball" line, and thus had an opportunity to visit Europe and to attend clinics at St. Thomas' and Guy's in London, and also in Paris.

Upon his return from Europe he engaged in the practice of medicine at Aurora for a short time, when he received the appointment of medical superintendent of the Illinois Northern Hospital for the Insane at Elgin, a state institution, one wing of which was just nearing completion. He entered upon his duties at Elgin, September 15, 1871, and continued in charge until his death in February, 1890, a period of nearly 19 years.

In 1875 the hospital was completed, furnished and occupied to its full capacity of 500 patients.

During the last four or five years of his life his health became much impaired through a long illness brought on by overwork, which nearly cost him his life and left him with a chronic rheumatic condition of joints and system. He suffered a slight paralytic attack in November, 1889, which was followed by more serious attacks of the same kind, the last occurring a few days before his death in February, 1890.

He was twice married and left a widow and three children.

He was a member of the Fox River Medical Society, of the Illinois State Medical Society, of the American Medical Association, of the Medico-Legal Society of New York, and of the Association of Medical Superintendents of American Institutions for the Insane.

DR. EDWIN WARREN KING.

Dr. Edwin Warren King was born at Alexander, N. Y., June 16, 1831. He came to California in 1850 and for several years engaged in mining, at the same time studying medicine. As soon as he was able he entered the Cooper Medical College in San Francisco, from which he graduated in March, 1863. He began the practice of medicine in the mining districts of California, and in 1870 removed to Ukiah, Mendocino County, where he built up an extensive practice.

When an appropriation was secured for the erection of the Mendocino State Hospital Dr. King was appointed on the Board of Directors, and actively engaged in the general supervision of the construction of the institution. Upon the completion of the buildings he was elected superintendent, his duties commencing July 1, 1893. He remained continuously in office in this position until May 1, 1912, when, at the age of 81, he resigned on account of the loss of his right leg. He died January 11, 1914, in San Francisco.

Dr. King was most efficient and conscientious in his duties as superintendent of the Mendocino State Hospital, and was deeply interested in the work of the institution. A hard student, he preferred to study his cases himself rather than to rely on the opinions of others, and was in close touch with his patients. During the 20 years of his service at the hospital he devoted the full energy of his mind and body to the study of mental diseases.

DR. THOMAS STORY KIRKBRIDE.

Thomas Story Kirkbride, M. D., LL. D., was born July 31, 1809, near Morrisville, Bucks County, Pa. He was a descendant of Joseph Kirkbride, of the parish of Kirkbride, County of Cumberland, Eng., a member of the Society of Friends, who came to this country with William Penn. Dr. Kirkbride received his edu-



DR. E. A. KILBOURNE.



DR. G. F. KEENE.



DR. G. H. ROHÉ.

cation at Trenton, N. J., under the Rev. Jared D. Tyler, and afterwards took a course of higher mathematics at Burlington with Professor John Gummere. In 1828, at 19 years of age, he began the study of medicine, with Dr. N. Belleville, of Trenton, as his preceptor, and attended three full courses of lectures in the medical department of the University of Pennsylvania, and graduated with honors in March, 1832.

In April of the same year he was appointed resident physician to the Friends' Asylum for the Insane at Frankford, Philadelphia, and in March, 1833, he was elected resident physician to the Pennsylvania Hospital, where he remained two years and had charge of the "west wing," devoted to the treatment of the insane. He left the hospital in 1835 and settled in Philadelphia, in the general practice of medicine, in which he was highly successful, obtaining a recognized reputation in the treatment of insanity. He was also physician to numerous charitable institutions, including the House of Refuge, the Magdalen Hospital and the Institution for the Blind.

At this time the Pennsylvania Hospital erected a new building on Haverford Road and (now) 42d Street, to be especially devoted to the care and treatment of the insane, which was completed in 1840.

In October of that year he was unanimously elected physician-in-chief and superintendent of this new institution, which was styled "The Pennsylvania Hospital for the Insane." At the solicitation of his friends and the profession he accepted, resigning his practice in December to enter upon his duties. The institution was opened on the 1st day of January, 1841, and he remained its superintendent from that time until his death.

The hospital was first opened with 97 patients, and was gradually enlarged until in 1854 it was capable of accommodating 235 patients.

He was an advocate of hospitals for the insane of small size, maintaining that the number in one hospital should never exceed 250. As the institution was full he recommended to the Board of Managers the erection of a new hospital on the ample grounds of the institution, for the complete separation of the sexes, proposing to retain the old hospital for women and to erect the new

one for men. He recommended an appeal to the public for funds, which was made with entire success, and the new hospital was completed wholly from private contributions, amounting to over \$350,000. Dr. Kirkbride was himself the center of this appeal, and the work stands as a monument to his high character, professional reputation, zeal and energy.

The new hospital for men was opened on the 29th of October, 1859, with a capacity for 250 patients, at a cost of \$355,000. The old hospital was remodeled and refitted for women, and two new wards added at a cost of \$60,000, giving it capacity for 250 patients.

He was one of the organizers of the Association of Medical Superintendents of American Institutions for the Insane, at Philadelphia, in October, 1844, its first secretary and treasurer, and subsequently president of the association for eight years. He was rarely absent from meetings of the association, and was ever ready to impart his knowledge and experience. He was conservative, of strong common sense, and his opinions justly carried great weight.

He early gave much attention to the construction of institutions for the insane, and was a strenuous advocate of transforming them into actual hospitals, and providing them with the conveniences and comforts of home, so necessary to the best means of cure. In 1844 he published a work entitled "Rules for the Government of those Employed in the Care of the Insane."

The July and October numbers of the *Journal of Insanity* for 1854 contained two articles by Dr. Kirkbride on "The Construction, Organization and General Arrangements of Hospitals for the Insane," subsequently, in 1856, issued as a special work, which has become a standard authority. He was a contributor to *The American Journal of Insanity*, in which will be found a number of his monographs and reviews. He also contributed to *The American Journal of the Medical Sciences*.

In 1839 Dr. Kirkbride was elected a fellow of the Philadelphia College of Physicians, and was a member of the State Medical Society of Pennsylvania and of the County Medical Society of Philadelphia; also a member of the American Medical Association, of the American Philosophical Society, an honorary member of the British Medico-Psychological Association, and of other societies for the promotion of general and medical science, both at home and abroad.

He died December 16, 1883.

DR. ABRAM H. KNAPP.

Abram H. Knapp, M. D., was born in Blenheim, N. Y., August 16, 1829, and graduated at Rush Medical College in 1852 in his 23d year. He first began the practise of medicine in Coxsackie, N. Y., but removed in a few years to Poughkeepsie. In 1862 he was appointed medical examiner of enlisted men by Governor Fenton, and discharged the duties of the position with credit and success.

In 1870 he went to Ottawa, Kans., to practise his profession. In 1873 he was appointed superintendent of the Osawatomie Insane Asylum, which then had a capacity for 112 patients. In this field of practice his peculiar traits of character were displayed and fully developed. He was a firm and strict disciplinarian, performing his own duties faithfully and conscientiously, and exacting the same measure of faithfulness from all employees. He formed his opinions slowly, but held them tenaciously. He had no patience with shams and frauds.

Towards his patients he was considerate and humane, dealing tenderly with their infirmities and giving his whole energy to each particular case as it came under consideration. To their relatives he was a friend and deeply sympathetic.

He was superintendent of the asylum for 19 years, his resignation taking effect June 30, 1892, at the close of the fiscal year. During this period of his superintendency the capacity of the asylum increased from 112 to 750 patients. The last addition, a detached building for 250 patients, nearly ready for occupancy upon his resignation, was named "Knapp Building" by the trustees in his honor.

His retirement from the asylum upon July 1, 1892, was in order to return to his former home (in Ottawa) to enjoy the quiet domestic life which he highly prized. But his home life was of short duration. He died of a sudden attack of pneumonia, December 30, 1892.

DR. WILLIAM C. KRAUSS.

On the 21st of September, 1909, William Christopher Krauss, M. D., died in New York City from cerebral embolism. He had landed a few hours previously from a steamer on which he was

returning from Nauheim, Germany, whither he had gone in a vain quest of health.

He was born in Attica, N. Y., in 1864. He there attended the public school and later entered Cornell University, from which he graduated in 1884. In 1886 he received the degree in medicine at Bellevue Hospital Medical School, and later spent several years in Germany, receiving a degree in Berlin in 1889. While at Cornell he became much interested in comparative anatomy and was prominently identified with the work of Professor Wilder. He came to Buffalo in 1889 and established himself in a specialty of mental and nervous disease. His attainments, his studious habits, and his devotion to his profession won for him a prominent place, and he became one of the leading physicians in Western New York and a prominent and respected citizen of Buffalo. He accepted with too free a spirit the burdens which an arduous professional life imposed, and labored in season and out, and thus impaired his health and hastened his death at the early age of 45 years.

He was president of the Board of Managers of the Buffalo State Hospital; chief physician at the Providence Retreat, Buffalo; consulting neurologist at the Buffalo General Hospital, the Erie County Hospital, the Emergency and German Hospitals. He belonged to the Faculty of Medicine of Buffalo University and was a member of the most prominent state and local medical societies. He was a member of the American Medico-Psychological Association for many years; the first secretary of the Buffalo Academy of Medicine, and one of its founders.

The managers of the Buffalo State Hospital, at the time of his death, adopted the following minute, accompanying the usual resolutions, which expresses their appreciation of his worth:

He was appointed, by the Governor, a member of the Board of Visitors to the Buffalo State Hospital in October, 1902. When the Board of Managers was restored he was appointed a member and was elected president. For upwards of seven years he faithfully fulfilled the duties of a manager of the institution, attending its meetings regularly, visiting the hospital at frequent intervals, maintaining a close personal interest and acquaintance with many patients, and an intimate knowledge of hospital work. His training as a physician especially qualified him for the duties of manager which he so faithfully performed.

Dr. Krauss' published contributions to the literature of medicine, more particularly to that of his specialty, number more than 100 articles. Within the last two years he translated Mendel's textbook on "Psychiatry" from the German, and had in preparation a work on tumors of the spinal cord, to which subject he had given great attention. He was assistant editor of the *Buffalo Medical Journal*.

DR. CHARLES H. LANGDON.

Dr. Charles H. Langdon, second assistant physician at the Hudson River State Hospital, Poughkeepsie, N. Y., died of appendicitis November 15, 1905. He was born in New York City in 1853. He received his literary education in Fordham College, and graduated in medicine from the College of Physicians and Surgeons in 1874. He became deeply interested in the study of nervous and mental diseases and was appointed to the staff of the Hudson River State Hospital in 1877. He was continuously in the service of the hospital from that date until his death, with the exception of a brief period, during which he engaged in private practice in Poughkeepsie. He was an earnest student of medicine and found time in the midst of arduous duties to keep himself in touch with current medical literature and important advances in his profession. He possessed sound judgment, a warm heart, and extraordinary capacity for work. He was greatly liked personally and had many warm friends in as well as out of his profession. During his long period of connection with the Hudson River State Hospital he had under his personal care many patients to whom his unvarying kindness was a never-failing source of comfort, and his interest and zeal for their welfare were unflagging. He was married and left a wife, a son, a daughter, and an aged mother.

DR. OLIVER MONROE LANGDON.

Oliver Monroe Langdon was born February 2, 1817, near Columbia, one of the suburbs of Cincinnati. His father, Rev. Oliver Langdon, was a physician, a farmer and a clergyman of the Methodist Church, who emigrated from Massachusetts to Hamilton County in 1800. His mother was a daughter of Colonel William

Brown, a soldier of the Revolution, who, with her parents, settled near Cincinnati as early as 1789. At the age of 12 years, his parents being dead, he moved to Cincinnati and made his home with a cousin. Here he attended one of the best private schools in Cincinnati. At the age of 14 years he entered Woodward High School and remained for one year. He later studied for two years at the Athenæum, now St. Xavier's College, at the same time working to pay his expenses. He commenced the study of medicine in the office of Prof. Cobb, of the Medical College of Ohio, and graduated from the college in 1838. From 1838 until 1842 he resided at Madison, Ind., when he returned to Cincinnati. Soon afterwards he was appointed physician for one of the four districts or townships into which the city was then divided, and held this position until the commencement of the Mexican War. He was appointed surgeon to the 4th Ohio Regiment under Colonel Brough, and followed the fortunes of his regiment in Mexico, and returned with it in 1848.

Soon after his return from Mexico he was appointed physician to the House of Refuge, and afterwards physician to the asylum at Lick Run, and held these positions until 1856. In 1859 he was appointed superintendent and physician of Longview Asylum, the new institution for the insane just completed. He held this position until 1870, when he resigned on account of failing health. He was one of the founders of the Miami Medical College and one of the promoters of the humane movement which took the insane from the old Commercial Hospital to Lick Run, and finally resulted in the building of Longview. To him as first superintendent of Longview is due the credit of organizing that institution. He also organized and put in operation the first American asylum for the colored insane, which was established in 1866 and made a separate department at Longview, for the colored insane of Ohio. As the trustees of Longview could not purchase and own an institution for the colored insane it was purchased in the name of Dr. Langdon, and for a long time held in trust for the county. He had been one of the trustees of the Miami Medical College since its foundation; he was a member of the American Medical Association, of the Ohio State Medical Society, of the Cincinnati Medical Society, of the Cincinnati Medical and Chi-

rurgical Society, and of the American Medico-Psychological Association.

He died of apoplexy on June 15, 1878, in the City of Cincinnati. He never married.

HON. WILLIAM PRYOR LETCHWORTH.

William Pryor Letchworth was born in the State of New York in 1823 and had acquired at the age of 46 years such a fortune as enabled him to retire and devote himself to carrying out the main purposes of life as he conceived them to be: to aid the sick and the suffering, to succor the unfortunate "children of the state," to alleviate the conditions of the poor, to develop the spiritual side of life by fostering art, history, literature and general education; in short, to promote social welfare in all directions and to do good to others. He died in his 88th year, and for over 40 years had devoted his life, energy, time and ample means to the single aim of a broad philanthropy.

For 24 years he was a member of the State Board of Charities, giving practically the whole of his time to its duties. In this capacity he inspected in 1875 all of the orphan asylums and juvenile reformatories of the state, containing nearly 18,000 children at that time, and made a report of 500 pages to the Legislature, calling attention to several thousand neglected children in almshouses and poorhouses, and demanding a law for their removal from such degrading environments. The law was enacted and enforced. His work also brought him into touch with the aged and infirm, the blind, the feeble-minded, the insane and the epileptic.

As a trustee and at one time president of the Academy of Fine Arts, as trustee of the Female Seminary, and as member and ex-president of the Historical Society (all of Buffalo), he showed the breadth of his philanthropic interests.

Over 50 years ago he began to acquire as a home certain lands bordering upon the Portage Falls of the upper Genesee River, and finally secured an estate of over 1000 acres, extending three miles along both banks of the river, and including three splendid cataracts from one-half mile to one and one-half miles apart plunging down through rocky gorges. Taking Downing as his master, he

beautified this estate by bounteous tree planting, drives, paths, stairways and arbors, and with the instinct of a poet he made it one of the most beautiful of parks. It is unique in the wild picturesqueness of its waterfalls and gorges. At his death the estate was bequeathed to the people of the state and is now a permanent possession under the name of Letchworth Park.

In relation to what he accomplished for epileptics and the insane Dr. Frederick Peterson, of New York, says:

I was brought much into contact with him for many years and he submitted the proofs of both of his books, "The Insane in Foreign Countries" and "The Care of the Epileptic," to me before they were issued. I thus came to know him well. When, after a visit to the Bethel Colony of Epileptics at Bielefeld, in Germany, I began to work for the establishment of a similar colony in this state, both Mr. Letchworth and Mr. Craig immediately took up the project and ultimately pushed it through the Legislature with the help of other members of the State Board of Charities and of the State Charities Aid Association. The colony was named after Mr. Craig, because he was president of the State Board at the time and died just before the law creating the colony was passed. Gov. Flower suggested the name of Craig Colony for the new institution. But Mr. Letchworth actually did more work in connection with the selection of the site, the passage of the law and the organization of the colony than any other member of the state board. The site was called to his attention by H. E. Brown, of Mount Morris, and he was immediately impressed with its peculiar adaptation to the colony's needs. He asked me to go over it with himself and Mr. Craig. We were all so enthusiastic that it was practically decided upon at once. It was a piece of land 1860 acres in extent, forest and farm, already a colony in fact of the sect of Shakers, with numerous well-built houses upon it, and a deep gorge making a natural division for the sexes. I need not tell how it was speedily acquired, how the model village was laid out upon landscape plans from Frederick Law Olmstead, and with building plans by Carrere and Hastings. Now there are 1400 epileptic inhabitants. Mr. Letchworth was deeply interested in the growth of the colony from the first, and as Glen Iris is but a short distance away from it, he was a constant visitor and counsellor to the superintendent of the institution as long as his health permitted. Recently the new and similar colony established in the southeastern part of the state has been rightly named for him the Letchworth Village.

In order to qualify himself to promote the welfare of the insane, and to fix some ideal standard in their care, he made a seven months' tour abroad to examine the asylums and methods of care in Great Britain, Scandinavia, the Low Countries and France and Germany. The results of this study he embodied in his well-known book on "The Insane in Foreign Countries," an excellent work of reference, which had done much to shape our systems of construction and organization. I believe this book is destined for a

wider appreciation still in time, for I do not think we have yet grown up to the ideals in the mind of this far-seeing man. He knew long ago that the colony system is best for the insane, and that occupations of all kinds should be multiplied to an extent not dreamed of yet. We still lag far behind him in these particulars.

DR. JOSEPH D. LOMAX.

Joseph D. Lomax was born in England, April 4, 1829, of ancestry originally French. He came with his parents to this country in 1832, and after completing his education was for many years engaged as teacher in a private classical school. He studied medicine at the College of Physicians and Surgeons in New York and at the Long Island Hospital College in Brooklyn, graduating at the former in 1862. After serving for 16 months in a hospital in New York City he removed to Troy in 1863, and was soon afterwards appointed medical superintendent of the Marshall Infirmary and Rensselaer County Insane Asylum. He was a member of the Rensselaer County Medical Society, and served as its librarian and one of its censors, and also on the Committee of Ethics. He was appointed a delegate to the State Medical Society in 1875. He died of apoplexy, July 22, 1899.

DR. OSCAR RUSSELL LONG.

Dr. Oscar Russell Long was born at Williamsport, Pa., August 16, 1850. He was educated in the public schools of Williamsport and at the age of 16 years became a teacher in a country school in Lycoming County, Pa.

In October, 1871, he took a course in anatomy at the University of Michigan at Ann Arbor, and later completed his medical course, graduating at the Detroit Medical College, where for a year he was employed as a teacher.

In 1874 he removed to Ionia, Mich., and began the general practice of medicine.

In 1885 he was made medical superintendent of the Asylum for Insane Criminals at Ionia, and continued in charge until his sudden death on September 10, 1914.

He was appointed by Governor R. A. Alger when the first building of the Michigan Asylum for Insane Criminals was erected in connection with the Michigan Reformatory at Ionia.

In 1899 the name was changed to the Michigan Asylum for Dangerous and Criminal Insane, and later to the Ionia State Hospital.

The accommodations furnished by the original buildings were taxed by the number of patients from the very start, and soon it became necessary to plan a colony, as there was no room for further buildings in connection with the reformatory. Accordingly 217 acres of land were purchased for the purpose. Here, upon a beautiful site chosen by himself, Dr. Long planned and supervised the erection of a dozen attractive buildings for the housing of patients and the accommodation of medical and other officers. This colony is now the main institution and the original structure is a branch of it.

In 1898 the Homeopathic Medical School of the University of Michigan conferred upon him the honorary degree of Doctor of Medicine. Two years later he was offered the position of dean at the same school, but declined it. He filled the position of lecturer upon mental and nervous diseases at Ann Arbor for several years. He was much engaged in medico-legal work as an expert witness. He was regarded as an excellent administrator, a strict disciplinarian and an economical and efficient medical superintendent. The ideal location and artistic arrangement of the buildings of the Ionia Hospital and the general beauty of the grounds were all largely due to his excellent taste and personal attention.

He was one of the leading men in his school of medicine in the state and a valued citizen of the community in which he resided. He was personally attractive and made many warm and enduring friendships.

DR. ALEXANDER S. McDILL.

Alexander S. McDill, M. D., was born in Crawford County, Pa., March 18, 1822; he was educated at Alleghany College and studied medicine and received his diploma at the Cleveland Medical College. After some years of professional labor in his native state, he removed to Wisconsin. In 1862 he represented his district in the State Legislature, and in 1863-64 he was a member of the State Senate. As a legislator he wielded great influence in the bodies to which he was elected.

In 1862 he was appointed a trustee of the Wisconsin State Hospital, and manifested a lively interest in all that pertained to the welfare of the institution. In 1868 the board experienced difficulty in procuring a competent superintendent, and finally insisted that Dr. McDill should take charge of the institution temporarily. With many misgivings, he consented to act as superintendent for a short time. At the end of the three months, so satisfactory had been his administration, the Board of Trustees insisted that he should take permanent charge of the institution. With great doubts as to his ability to conduct the affairs of the hospital, he finally accepted the position, and from first to last his administration was a success.

In 1872 Dr. McDill was elected to represent his district in Congress, and discharged the duties of this office with the same honesty of purpose and undivided attention to the business before him that characterized his work in other walks of life. After retiring from Congress he was again asked to take charge of the institution which he had left for two years, and in April, 1875, he resumed his duties at the State Hospital at Madison, intending to devote the remainder of his life to the care of the insane. His labors, however, were soon cut short by his death on the 13th day of November, 1875, in his 54th year.

"As a hospital superintendent, Dr. McDill was remarkably successful. He was a clear-headed man in all things, cool and deliberate in his actions, an excellent judge of human nature, an industrious man, popular and pleasant in his manner; in fine, he possessed executive ability of the highest order. In all the relations of life Dr. McDill was an exceptional man; as a legislator, he was able, industrious and efficient; as a physician, he was skillful and successful; as a hospital superintendent, he was accomplished and popular; as a citizen, he was liberal and ever ready to act well his part; as a friend, he was true and reliable; and as a husband and father, he was affectionate, kind and indulgent."

DR. ALEXANDER E. MACDONALD.

Dr. Macdonald was born in Toronto in 1845, and after his preliminary education in Upper Canada College, studied medicine at Toronto University and received his degree of M. D. at New

York University. Later he studied law and graduated at the same university with the degree of LL. B., in 1881. He was later appointed to the chair of medical jurisprudence in the same university. In 1871 he was appointed chief of staff of the Blackwell's Island Hospital for Epileptics and Paralytics, and four years later became medical superintendent of the New York City asylums on Ward's, Blackwell's and Hart's islands. Through his efforts a farm colony was established at Central Islip, which, however, was not opened for patients until 1889. Upon the transfer of the city institutions to the state-care system in 1896 Dr. Macdonald was made general superintendent of the different branches above mentioned. Later, in the division of the institutions, he became superintendent of the Department for Men, remaining in that capacity until his retirement in 1904.

Endowed with a fine physique, it was possible for him to cope single-handed with terrific obstacles in perfecting his plans for the amelioration of the condition of the insane in the city asylums. To him must be given the major credit for the remarkable improvements both before and after the transfer to the state-care system. He held an autocratic sway over subordinates, but maintained that half-way measures would not meet the local problems.

With trenchant pen and resounding voice he fought and won many battles for the poor and friendless patients committed to his care. Better food and clothing, better nursing, greater liberty, suitable occupation, special care of the tubercular class and suitable homes for nurses—these were a few of the fine accomplishments of this man. Ward's Island became a Mecca to which sojourners from far and near journeyed in search of guidance and inspiration. As a writer and alienist, Dr. Macdonald held high rank, his literary labors covering a period of 30 years. He was a member of the leading medical societies and also president of the American Medico-Psychological Association. He represented this country at several international medical congresses, at which he was always a welcome and witty speaker.

DR. JAMES MACDONALD.

James MacDonald was born at White Plains, N. Y., July 18, 1803. His father, Dr. Archibald MacDonald, a native of Scotland, came to America in childhood.



DR. ALEXANDER E. MACDONALD.

The first years of his life were spent in his native village. After his father's death in 1813 his education was carefully superintended by his excellent and devoted mother. His first classical instructor was Isaac Hulse, who afterwards became a distinguished surgeon in the navy. Subsequently he was sent to the academy at Bergen, in New Jersey, then under the care of Mr. Thomas Gahagan, where he continued for several years. The profession of medicine was his own determinate choice, in opposition to the wishes of nearly all his friends.

In 1821 he began the study of medicine in his native village with Dr. David Palmer, and afterwards was a pupil of Dr. David Hosack, of New York, under whom he finished his medical studies. After several courses of lectures at the College of Physicians and Surgeons in New York he graduated, March 29, 1825.

The Bloomingdale Asylum at that day had a resident physician, generally a young man, who lived at the asylum, and was visited at stated times during the week by a visiting physician. At the time of Dr. MacDonald's graduation the resident officer had resigned. With a promptness and self-reliance which characterized him through life, he offered himself as a candidate for the vacancy. His frankness, youth and intelligence made a favorable impression upon the different members of the board, and he received the appointment, although opposed by two rival candidates.

Dr. MacDonald commenced the study of mental disease with enthusiasm, and the full responsibility of the Bloomingdale Asylum soon devolved upon him.

He remained at Bloomingdale as resident physician until the close of the year 1830, when he resigned to enter upon general practice in New York.

In the spring of 1831 the governors of the New York Hospital proposed to send him abroad to visit the insane hospitals of Europe, with the view of introducing at Bloomingdale such improvements as he might find. An agreement was entered into by which Dr. MacDonald was to spend a year in visiting the asylums of the Old World, to examine them in detail and to make himself acquainted with the economy, management and modes of cure practised there. On his return the governors were to commit to

his exclusive care the patients in the Bloomingdale Asylum, and he agreed to remain until June, 1837.

In June, 1831, he sailed in the packet ship *Havre* to France, furnished with letters and documents which secured for him a favorable reception from directors and physicians of hospitals and from the friends of science and humanity. He arrived at Havre on June 24, and immediately went to England, the first field of his investigations.

In October he returned to New York and assumed charge of the Bloomingdale Asylum, where he remained until the autumn of 1837.

He then resumed his general practice in New York. He was soon elected by the governors one of the attending physicians of the New York Hospital.

In 1841 he carried into execution a long-cherished design to establish in association with his brother, Allen MacDonald, a private institution for mental diseases. For this purpose two houses agreeably situated on Murray Hill, in the suburbs of New York, surrounded with ample grounds and shut out from public view by high enclosures, were at first secured. The establishment was opened in June, 1841. In 1842 he was tendered the appointment as superintendent of the New York State Lunatic Asylum, which he declined.

In the winter of 1845 the brothers purchased the mansion of the late Chancellor Sanford, at Flushing, one of the most costly and substantial country houses in America. To this place, which they named Sanford Hall, they removed their establishment.

Dr. MacDonald died suddenly of pneumonia May 5, 1849.

His only published works are an essay on the construction and management of insane hospitals; a review of considerations upon the insane by G. Ferrus, *Philadelphia Medical Journal*, 1837; statistics of the Bloomingdale Asylum, *New York Journal of Medicine and Surgery*, 1839; letter to the trustees of the New York State Lunatic Asylum, proposing a plan for organizing said asylum, New York State Lunacy Report, 1842; a dissertation on puerperal insanity, *Journal of Insanity*, 1848; several reports on the condition of Blackwell's Island Lunatic Asylum.

DR. ANDREW MCFARLAND.

Dr. Andrew McFarland, founder of Oak Lawn Retreat, near Jacksonville, Ill., died in November, 1891, at the age of 74.

He was born at Concord, N. H., in 1817. He was educated at Dartmouth College and at the Jefferson Medical College. He was superintendent of the New Hampshire Asylum for the Insane from 1845 to 1854, and of the Central Hospital for the Insane at Jacksonville, Ill., from 1854 to 1870, from which institution he resigned to establish the Retreat. He is said to have introduced, and always strongly advocated, the cottage system of hospital care for the insane. He was president of the Association of Medical Superintendents of American Institutions of the Insane at an early day.

DR. HUGH F. McNARY.

Hugh Flournoy McNary, A. B., M. D., was born at Princeton, Ky., January 15, 1837. He graduated from Cumberland College, Princeton, in 1857. He studied medicine in his father's office, and attended one course of lectures at the Medical Department of the University of Louisville, 1860-61. He graduated from the Medical Department of Harvard University in 1863. He entered the U. S. Army service as assistant surgeon at Camp Nelson, and served subsequently at Jeffersonville, Ind. He accompanied Dr. Middleton Goldsmith in General Banks' Red River campaign. He left the U. S. Army August 31, 1865, and settled in Louisville, Ky., in the practice of his profession. In 1867 the Governor of Kentucky appointed him physician to the Western Kentucky Lunatic Asylum at Hopkinsville. He resigned this service in 1869, and returned to Princeton, and was elected city and county health officer. In 1895 Governor Bradley appointed him superintendent of the Central Kentucky Asylum for the Insane. He entered upon his duties with a full sense of his responsibility. He inaugurated new methods of general management; classified and arranged each subordinate department, and inaugurated important improvements in the buildings of the institution, which were rapidly approaching completion when a fatal affection of the heart seized him, and on May 12, 1897, he died at the home of a relative in Louisville.

SAMUEL FAIRBANK MELLEN.

Samuel Fairbank Mellen was born June 11, 1855, in Natal, South Africa, where his father had gone from Massachusetts as a missionary four years previously. At the age of 16 he returned to Massachusetts and entered Phillips Andover Academy, from which he subsequently graduated. He entered Amherst College, from which he received a degree in 1878. He studied medicine at New York University and received his degree in 1884. Following this he practised medicine in New Mexico. He later returned to Ossining, N. Y., and became health officer of that village. In 1891 he entered the New York State hospital service. He was assistant physician in Willard State Hospital from 1891 to 1898. In 1899 he became an assistant physician at the Kings Park State Hospital and was transferred to the Hudson River State Hospital in the following year, where he remained as an assistant physician up to the time of his death.

He was a man of upright character, conscientious in his dealings with others, and of a very kindly nature which endeared him to many. He had scholarly tastes and read extensively. He was a member of the Medical Society of Dutchess County, of the Medical Society of Westchester County and of the American Medico-Psychological Association.

Following a sudden attack of acute appendicitis, an early operation was performed, but peritonitis set in and he died three days later, July 15, 1914.

DR. S. WEIR MITCHELL.

S. Weir Mitchell, M. D., LL. D., was born in Philadelphia on February 15, 1829, and at his death had nearly reached the age of 85. He was educated in the grammar schools of his native city and at the University of Pennsylvania, but did not take an A. B. degree because of illness during his senior year. His degree of M. D. was taken at the Jefferson Medical College in 1850, and in 1888 he was given an honorary M. D. at Bologna. Harvard in 1886, Edinburgh in 1895, Princeton in 1896, and Toronto in 1906, conferred upon him the degree of LL. D.

He established himself in practice in Philadelphia and early became known for his interest in physiological studies and subsequently in neurological investigations.

During the Civil War he had extended opportunities to study gunshot wounds and other injuries of the nerves at the Turner's Lane Hospital in Philadelphia, established for their care, of which he had charge. His work entitled "Gunshot Wounds and Other Injuries of the Nerves," written in conjunction with Drs. George P. Morehouse and W. W. Keen, and published in 1864, was the result largely of observations made at this hospital. A larger work by Dr. Mitchell, "Injuries of Nerves and Their Consequences," was issued in 1872. In 1873 he published "Wear and Tear: or, Hints for the Overworked," and in 1875, "Rest in the Treatment of Disease." In 1877 he published "Fat and Blood."

The "Mitchell Treatment," as it has been called by some, especially on the Continent, but better known as the "Rest Cure," detailed in the work issued in 1875, has been, with various modifications, generally adopted and practiced in suitable cases throughout the world, and the introduction and teaching of a systematic "rest cure" made his name more widely known to the medical profession than any other contribution of his to medical literature.

For many years he was the leading neurologist of America, and a certain proportion of his consultation practice had to do with mental cases. Little or nothing, however, appeared from his pen upon strictly psychiatric topics.

In May, 1894, he delivered the annual address at the 50th annual meeting of the American Medico-Psychological Association in Philadelphia. It had been through life a habit with Dr. Mitchell to place problems before his associates and friends by sending out a questionnaire upon topics which interested him, and he followed this custom in preparing this address. To 30 of "one of the ablest groups of men known to me (he says), the neurologists and consultants of our cities," he sent a letter asking for suggestions, and apparently received many. At that time the men to whom he referred were not fully familiar with the work and methods of those responsible for the conduct of hospitals for the insane and were not in sympathy with them. Nor was the orator altogether well informed as to the recent trend of hospital work and methods, as shown in the addresses of Dr. Cowles and others at the same meeting. Many of the changes which Dr. Mitchell suggested were already in practice; many were and continue to be utopian. Nevertheless the address made a strong impression and accom-

plished good and has been of great value to medical officers of institutions for the insane who have had occasion to ask their managing boards to adopt advanced methods and to furnish more medical assistants and better nursing.

It is seldom given to one man to achieve fame in two distinct departments of endeavor. Dr. Mitchell accomplished this. After establishing an enviable reputation as a neurologist, he entered the field of literature, and as a novelist and a poet attained almost equal prominence, but he did not abandon his medical work. He was accustomed to take long summer vacations, when as far as possible he put aside medical work and entered upon the joys of literary creation.

Investigator, clinician, consultant, poet, novelist, man of affairs—in all the personality of the man loomed large. It influenced the lives and thoughts of all who came in contact with him, either personally or through the printed page, and ever and always that influence was for good.

DR. THOMAS J. MITCHELL.

Dr. Thomas J. Mitchell was born in Limestone County, Ala., July 4, 1834.

His early youth was spent in Alabama. He received his literary education at the University of Alabama, and was granted a medical diploma from the University of Pennsylvania in 1852.

After graduating, he moved to Jackson, Miss., and began the practice of medicine, but in 1856 he took a post-graduate course in Europe, spending a year there. Returning to Mississippi, he was actively engaged in the practice of medicine until 1862, when he entered the Confederate service as surgeon to the 39th Mississippi Regiment.

After the war he returned to Jackson, Miss., and engaged in private practice until 1878, when he was appointed superintendent of the Mississippi State Hospital, which position he held until May, 1910, when he retired after a continuous service of 32 years.

In 1858 he married Miss Annie McWillie, the daughter of ex-Governor McWillie, of Mississippi; to this union were born five daughters and three sons; two sons and two daughters survive. His wife died in 1878.

After his retirement he lived quietly in Jackson, surrounded by his children and friends, until his death, September 16, 1912.

He was a member of the State Medical Association, and at one time its president; of the American Medical Association and of the American Medico-Psychological Association. He was a close student and keenly interested in everything pertaining to his profession.

He entered upon institutional work under great disadvantages, as the state was then emerging from the misrule of the reconstruction period. The state was all but bankrupt, and appropriations for the asylum were not sufficient; yet with these disadvantages, he made a hard, but in the end a successful, fight for those intrusted to his care.

He was courteous to all, and by reason of his strict sense of honor and of duty to his trust he merited the long continued confidence of the people whom he served so well.

He was for years one of the leaders in the Episcopal Church and active in all good works.

DR. JAMES DUNLOP MONCURE.

On November 10, 1898, Dr. James Dunlop Moncure, late superintendent of the Eastern State Hospital, Williamsburg, Va., died after an illness of one week.

He was born in Richmond, Va., in 1842. After attending the Abbott School in Fauquier County, Va., he was sent to some of the best schools in France and Germany. At the University of Heidelberg he began his medical studies. Returning to his native state, he entered the Virginia Military Institute, where he was a student at the breaking out of the Civil War. At first he was a drillmaster in the corps of cadets at Camp Lee, and later served in the field as a member of the 9th Virginia Regiment of cavalry.

Resuming his medical studies, he attended at first the University of Virginia and later the University of Maryland, from which institution he graduated with honors. He practiced his profession in Baltimore, Fauquier County, Va., Huntington, W. Va., and Richmond with success. While located in Richmond he filled the chair of adjunct professor in the Medical College of Virginia. In 1876 he founded the Pinel Hospital, near Richmond, an institution for the treatment of nervous diseases, and was its first medical superintendent.

He was a member of the Virginia Medical Society, the American Medico-Psychological Association, the Medico-Legal Society of New York, etc.

Owing to his extreme modesty and aversion to writing, he was not conspicuous in the public meetings of societies nor a frequent contributor to current medical literature; nevertheless, he was a student of his profession, well versed in its literature, familiar with all advances in treatment, and recognized as an alienist of ability.

Few who have held the responsible position of superintendent at Williamsburg possessed to a higher degree the qualities of an ideal physician and executive officer. During his administration of 14 years he made improvements, particularly of a structural nature, at the institution.

He was twice married. His second wife survived him.

DR. WILLIAM B. MOSELEY.

Dr. William B. Moseley, resident alienist of the Observation Ward of the Kings County Hospital, Brooklyn, N. Y., died suddenly on the morning of June 26, 1914. He was born in Dallas, Tex., about 45 years ago. He graduated from the U. S. Naval Academy at Annapolis, Md., and afterwards took the degree of M. D. at the University of Virginia. He entered the New York State service in August, 1896, as an assistant physician, serving in that capacity until March 28, 1904, when he was transferred to the Department of Public Charities of the City of New York and placed in charge of the observation ward of the Kings County Hospital, where the number of cases examined annually averages about 1500 and where he therefore gained a wide and valuable experience in psychiatry. His services were of a high quality and his gentle manner won for him a large circle of very warm friends.

DR. ALBERT ROSCOE MOULTON.¹

Dr. Albert Roscoe Moulton died at his home in Philadelphia, August 16, 1915, of uræmia, after a serious illness of six months, although failing health had necessitated his relinquishing his work in June of the previous year.

¹ Furnished by Owen Copp, M. D.

Dr. Moulton was born of good New England stock in South Parsonsfield, Me., September 21, 1852. He was largely self-dependent for his education, and early displayed in pursuit of it that energy which was characteristic of him in later life. Graduating in 1876 from the Maine School of Medicine, at Portland, the Medical Department of Bowdoin College, he began his life work in psychiatry soon thereafter when he became assistant physician in the New Hampshire Asylum at Concord under the superintendency of Dr. J. P. Bancroft. A satisfactory service of about six months ended with his appointment, February, 1877, as second assistant physician in the McLean Asylum, then at Somerville, Mass. The following September he resigned from McLean "to accept a permanent position in the new hospital at Worcester," Mass., where he completed a continuous and eminently successful work as first assistant physician, November 30, 1888. When the Massachusetts State Board of Lunacy and Charity decided to appoint its first *medical* inspector of institutions in succession to the distinguished F. B. Sanborn, who had resigned after many years as inspector of charities, their attention naturally turned to Dr. Moulton, already recognized as one of the ablest and most progressive of the physicians in the state insane hospitals. His selection for this important post in December, 1888, was most happy in its results. In his supervision of the institutions he was alert and active, sympathetic and stimulating, so that the impulse forward which he imparted was felt after his departure. The wisdom of the State Board in substituting *medical* for *lay* inspection of establishments for the insane and mentally defective was confirmed by the success of his administration. There has been no reversion to the former practice.

Dr. Moulton was influential in the movement which led to the erection of the Medfield Asylum, he was a member of the special commission therefor and actually worked out the plans of the buildings. It is the largest of the Massachusetts institutions for the insane and was the first to be built on the cottage plan.

He was greatly interested in family care of the harmless insane and was enthusiastic in his efforts to promote its extension throughout the state.

There was a general and sincere regret in hospital circles and among his many friends outside of these when, in 1891, Dr. John B.

Chapin, who had long known Dr. Moulton and felt a strong attraction toward him, called him to become his senior assistant physician at the department for men of the Pennsylvania Hospital for the Insane. Here he rounded out his long institutional career by a continuous, faithful and efficient service of 23 years.

His was a strong and attractive personality. His friendships with his patients and associates were warm and lasting. Kindly and faithful to his duties, broad and responsive in his sympathies, he was also a man of force who left his impress upon every situation in his life.

He was for many years lecturer on mental diseases in the Medical Department of Bowdoin College and for a time at the Woman's Medical College of Philadelphia. In addition to his membership in this association he was a fellow of the College of Physicians of Philadelphia, ex-president of the Philadelphia Psychiatric Society, member of the Philadelphia Neurological Society, and of the Pennsylvania State and Philadelphia County Medical Societies. His widow, residing in Philadelphia, survives him.

DR. PATRICK LIVINGSTON MURPHY.

Patrick Livingston Murphy was born in Sampson County, N. C., October 23, 1848. He was prepared for college, but did not take a college course owing to the outbreak of the Civil War. He studied medicine first under a preceptor, then at the University of Virginia, and finally at the University of Maryland, from which he graduated in 1871. Returning to North Carolina, he settled at Wilmington, and entered upon the practice of his profession. Finding the routine of practice irksome he accepted a position as assistant physician at the Western Virginia Asylum at Staunton, Va., to fit himself to become superintendent of the West North Carolina Hospital at Morganton, N. C. He was appointed superintendent, and entered upon his duties at the latter institution in January, 1883. He had great success in the management of this institution, and developed it into a hospital in name as well as in fact, when through his influence the name of state institutions for the insane was changed from asylum to hospital. His work was that of a pioneer, and he was obliged to contend with meager appropriations, great misapprehension of the duty of the state

toward her insane, and a heartless indifference to their welfare on the part of the legislators.

He wrote no elaborate papers on insanity, but his reports and pamphlets showed him to be a vigorous thinker and forceful writer. As a medical expert he was considered very able and was often called upon to give expert testimony.

He was a member of the North Carolina State Board of Medical Examiners, president of the State Medical Society, and at one time director of the school for the deaf.

He died September 11, 1907, after a long and painful illness.

DR. ALEXANDER NELLIS, JR.

Alexander Nellis, Jr., first assistant physician of the Willard State Hospital, Willard, N. Y., died at the hospital December 27, 1893, from epidemic influenza, complicated by pneumonia and resulting in early and extreme prostration. Within a few hours he became delirious and unconscious, and so continued at intervals for five days preceding the fatal termination.

He was born at Schenectady, N. Y., February 11, 1846. He received his preliminary education in the common schools of Amsterdam and at Poughkeepsie. In 1870 he registered as a student in the office of Drs. Snell and Robb of Amsterdam, and in December, 1872, graduated from the Albany Medical College. After graduation he served as an assistant city physician in the Albany City and County Almshouse and Asylum, and in October, 1873, was appointed assistant physician at the Willard State Hospital, then known as the Willard Asylum. He remained at Willard until May, 1880, when he removed to Denver. Later he received an appointment as surgeon to the Mexican National Railway, then in process of construction, and removed to Corpus Christi, and afterwards to Laredo, where he saw much of frontier life. In 1883 he was reappointed assistant physician at Willard, and in 1889 was made first assistant physician. In October, 1889, he married Miss Mary E. Meddick, who survives him.

He was a member of the Montgomery and Seneca County medical societies and president of the latter in 1885. He was an active member of the American Medico-Psychological Association. His published contributions are: "Report on a Case of

Acute Mania," *Alienist and Neurologist*, 1884; the presidential address, Seneca County Medical Society, "Insanity and its Treatment," published by request of the Society June, 1887; "Report on a Case of Atrophy of Brain and Idiocy," *American Journal of Insanity*, October, 1887. He also assisted in the compilation of the general index of the first 45 volumes of *The American Journal of Insanity*, published at Willard in 1889.

He entered the service of the Willard State Hospital four years after the institution began its active work. He was a witness of its growth and an efficient agent in its development.

DR. CHARLES H. NICHOLS.

Dr. Charles H. Nichols was born in Maine in 1820. He received his education at the Friends' School at Providence, R. I., and graduated from the Medical Department of the University of Pennsylvania in 1843. He was appointed assistant physician of the State Lunatic Asylum at Utica, N. Y., in 1848, and received the appointment of superintendent of the Bloomingdale Asylum in 1849, which he resigned in 1852 to accept the superintendency of the Government Hospital for the Insane at Washington. He prepared the plans and superintended the construction of that hospital and directed its affairs with great ability and satisfaction to the government until his resignation in August, 1877, when he was again appointed superintendent of the Bloomingdale Asylum.

On assuming charge of Bloomingdale Asylum Dr. Nichols devoted himself with his accustomed energy and assiduity to the erection of new buildings and the improvement of the whole institution; and when it was determined to build a new institution at White Plains he was requested by the managers of the asylum to visit Europe and examine the different institutions there with the view of adopting the best plans that could be devised for the new Bloomingdale Hospital. He sailed from New York on July 7, 1889, and visited and took careful notes of various institutions in Great Britain and on the Continent, returning to Bloomingdale on November 1, 1889. He died a short time after his return, on December 16, 1889.

DR. ALFRED IRA NOBLE.

Dr. Alfred Ira Noble was born in Fairfield, Me., March 3, 1856, and died in Detroit, Mich., on January 20, 1916.

He received the degree of A. B. from Colby College, Maine, in 1883, and M. D. from Bowdoin College in 1886. On August 27, 1887, he married Ella Annie Boole. He engaged in the practice of medicine in Boston for one year, then became associated with the Worcester State Hospital as first assistant physician, and later as assistant superintendent. He held the latter position until 1905, when he received the appointment of medical superintendent of the Kalamazoo State Hospital at Kalamazoo, Mich., which position he held at the time of his death.

For a number of years he was secretary of the New England Psychological Society. He was a fellow of the Massachusetts Medical Society and the American Medical Association, and member of the Worcester Medical Association, the American Medico-Psychological Association, the Detroit Society of Neurology and Psychiatry, the Michigan State Medical Society and the Kalamazoo Academy of Medicine.

He contributed from time to time to medical literature and also to the general public well prepared and scholarly papers on medical and sociological topics. A paper, "Shorter Hours for Nurses and Attendants," marked the beginning of an important change in hospital management.

During his administration at the Kalamazoo State Hospital he planned and directed the construction of Van Deusen Hospital, a receiving hospital for women. He also constructed a laboratory for pathological and research work. He recognized and emphasized the value of occupation, not only as a curative measure, but as a means of reeducation of chronic custodial cases; and through his efforts a large custodial building was in process of construction at the time of his death which will remain as a monument to his efforts in this direction. One of his last acts was to improve the standard of the training school for nurses, raising the requirements for admission, extending the course to three years, and requiring nine months' training in some general hospital. He was conservative, yet always progressive, a man of high ideals, and

possessing a wealth of tact, diplomacy and sincerity which won the confidence and lasting friendship of the public, his patients and associates.

DR. HENRY SMITH NOBLE.

Dr. Henry Smith Noble, superintendent of the Connecticut Hospital for the Insane, Middletown, Conn., died suddenly on Tuesday, March 16, 1915, at the home of his nephew, Dr. George S. Bidwell, in Waterbury, Vt., where he had gone for rest and recuperation. He was of New England ancestry, born October 8, 1845, at Harrisburg, Vt. He attended the public schools and the academy in his native town and later became a student at the Green Mountain Institute at South Woodstock, where he was a teacher while fitting himself for Tufts College. He graduated from Tufts with the degree of A. B. in the class of 1869, in which he stood second.

As a young man he had practical knowledge of hard work in his father's shop and upon the farm. He learned the trade of blacksmith in his father's smithy and was competent to carry it on. His father believed that "every man should have a trade, and if reverses came it would always be an available as well as a valuable asset."

He began his medical studies with Dr. D. W. Hazelton, of Cavendish, Vt., and took his first course of lectures at the University of Vermont, and a second course in 1871 at the College of Physicians and Surgeons in New York, from which institution he received his degree of M. D. He spent the following year at the Hartford (Conn.) City Hospital as an interne. He began the practice of his profession in 1872 at Chester, Vt., where he remained until the fall of 1879. In 1880 he was appointed second assistant physician at the Hartford Retreat and in the same year became assistant physician at the Connecticut Hospital for the Insane. In 1882 he held the same position at the Michigan State Hospital at Kalamazoo, but returned to the Connecticut Hospital for the Insane in 1884. He spent the summer of 1886 in Europe and upon his return was made first assistant physician to the Connecticut Hospital for the Insane. In September, 1898, he became assistant superintendent of the hospital, and in October, 1901, was appointed superintendent.

Dr. Noble was a member of the Connecticut State Medical Society, the American Medical Association, the Neurological Society of New York, the Connecticut Society of Mental Hygiene, and of the American Medico-Psychological Association.

DR. WILLIAM NOYES.

Dr. William Noyes died at his home in Jamaica Plain, Mass., October 20, 1915. The end came suddenly after an illness of many months, the gravity of which he fully realized.

He was the son of William and Martha Jane (Bailey) Noyes, and was born in Boston, November 6, 1857. He was graduated from Harvard University with the class of 1881 and from the Harvard Medical School in 1885. While in the school he was a clinical clerk in the Danvers State Hospital for four months, and after graduation accepted a fellowship in psychology at The Johns Hopkins University. He was for a short time resident physician of the Baltimore City Lunatic Hospital, and in December, 1885, was appointed second assistant physician of Bloomingdale Hospital, New York.

He early became interested in the field of research in psychiatry, and in February, 1889, accepted an invitation to organize a psychological laboratory at the McLean Hospital, supplementing his previous preparation for the work by nine months of study in Vienna and Berlin.

It was pioneer work, difficult and too often yielding negative results, which he modestly declined to publish, so that of much that he did there is no record. Among other studies he made investigations on the reflexes and published a part of his work in an important paper "On Certain Peculiarities of the Knee-Jerk in Sleep in a Case of Terminal Dementia." He made frequent contributions of critical reviews chiefly to the *American Journal of Psychology*.

In February, 1892, he accepted the position of assistant physician of the Massachusetts Hospital for Dipsomaniacs and Inebriates, where he remained until April, 1896, when he was elected superintendent of the men's department of the Boston State Hospital. He was made superintendent of both departments of the hospital in May, 1905, which position he held until January, 1910, when he resigned to engage in private practice.

There can be no doubt that the change to the clinical and executive field was due to the lack of appreciation in that day of the

money value of purely scientific work, which unfortunately still obtains, though in a less degree.

He was connected with the Boston State Hospital for nearly 14 years and gave it faithful service. It was a transition period, the many difficulties and anxieties of which no doubt contributed materially to the onset and progress of his illness.

After his retirement from hospital life he made a careful investigation and census of the feeble-minded outside of institutions in Massachusetts at the request of the State Board of Insanity, and rendered to the board a most interesting and valuable report, which unfortunately has not been published.

For many years he was a clinical instructor in mental diseases in the Harvard Medical School. He was a member of the Massachusetts Medical Society, the American Neurological Association, the American Medico-Psychological Association, and the Boston Society of Psychiatry and Neurology, of which he was the secretary at the time of his death.

He was an able man, of good judgement, but it was not easy for him to make decisions in important matters, and he did his work with many anxieties, contrary to the impression he gave those with whom he was not intimate. He was modest, sensitive, a man of warm friendships, domestic in his tastes, a loving husband and father. His death at a comparatively early age was a distinct loss to the medical profession.

DR. JAMES OLMSTEAD.

Dr. James Olmstead, superintendent of the Connecticut Hospital for the Insane, died at the Hotel Grenoble, New York City, December 4, 1897, after an illness of about two months, resulting from overwork, exhaustion of vital forces and mal-assimilation of food.

He was born in New Haven and was educated at Yale University, graduating third in the class of 1872. Upon receiving his academic degree he pursued the study of medicine in the Yale University Medical School, and received the degree of M. D. He became an interne in the New Haven Hospital, after which he began general practice in Middletown, Conn. In 1876 he was appointed an assistant physician, and upon the death of Dr. Shew, the superintendent of the Connecticut Hospital for the Insane, in

1886, he was called by the Board of Trustees to succeed him, and served there long and faithfully.

In 1882 he married Miss Emma Parmeton, daughter of the late John Parmeton, of Derry, N. H., who with one daughter survives him. For many years he had been prostrated, for a period varying from two to five weeks during each summer by symptoms similar to those which characterized his final illness, but after a period of rest and treatment he had apparently recovered. In his last attack his vital forces were too much exhausted for him to rally. A little more than two weeks prior to his death he was persuaded to go to New York for much-needed rest and treatment, but the change came too late, and despite the most skillful treatment and advice which the city afforded he sank rapidly.

DR. JOHN ORDRONAU.

John Ordronau, a medico-jurisprudent, only son of John and Elizabeth (Charreton) Ordronau, was born in New York, August 3, 1830. His father, a Frenchman, dying in 1841, the lad was adopted by John Moulton, of Roslyn, L. I. He received his A. B. at Dartmouth in 1850, and his LL. B. at Harvard in 1852. For two years he practiced law at Taunton, Mass., then removed to New York. He received the degree of M. D. from the National Medical College, Washington, D. C., in 1859. On the breaking out of the Civil War he was made examining surgeon for volunteers in Brooklyn, and in 1864 was appointed assistant surgeon of the 15th Regiment, New York National Guards. During this time he published the first American work on military hygiene, "Hints on Health in Armies," and a "Manual for Military Surgeons on the Examinations of Recruits and Discharge of Soldiers." His most important works were "Jurisprudence of Medicine" (1869) and "Judicial Aspects of Insanity" (1878), both of which passed through several editions. He also wrote copiously for the medical and legal press. He was New York State Commissioner in Lunacy from 1874 to 1882. For 48 years he was professor of medical jurisprudence in various prominent schools of law and medicine. His teaching record is as follows: 1860-1906, Columbia Law School; 1864-1908, Dartmouth Medical School; 1865-1873, National Medical College, Washington, D. C., and in the

law school of the same (Columbia) University; 1865-1873, University of Vermont, Medical Department; 1872-1889, Boston University Law School.

In 1870 he received the degree of LL. D. from Trinity College, and in 1895 the same degree from Dartmouth.

Dr. Ordronaux was a small, slender, frail-looking man ("of the ramrod type," as one of his army comrades expressed it), but well built and wiry. His hair was red, in later life white. His complexion was pallid, his eyes were keen, luminous and dark. He was slow, methodical and thoughtful, except when excited, when he was rapid and voluble.

He was timid physically and socially. He was so sensitive that the slightest physical hostility, or even opposition which savored of hostility, caused him to retire within himself. If when testifying as an expert in court the cross-examination became overbearing or brow-beating in character, he could scarcely (as he often informed his friends) refrain from bursting into tears. He was pertinacious in his opinions, but the mental and emotional strain sometimes made him ill. He had few friends, in the ordinary acceptance of the word, but everyone who knew him loved him.

He was a man of simple and economical tastes. For many years he limited his expenditure for his daily luncheon to 25 cents; after being remonstrated with upon the matter by his friends he allowed himself thereafter the princely sum of 40 cents. He denied himself many pleasures for the sake of saving the money which they would cost.

He was fond of books and was an authority upon them, yet he had not a large library. Although he had ample means, motives of prudence and economy always caused him to consider the advisability of purchasing a book.

He was a communicant of the Episcopal Church and a regular attendant at the services, and most earnest in his responses and singing. During the absence of the rector he occasionally conducted the services himself and read a sermon, usually one of Jeremy Bentham's.

He was a veteran of the Civil War, and on Memorial Day at the funerals of deceased members of his Grand Army post he would don his uniform and march with the rest.

He had great intellectual activity. Early in his career he published a poetical translation of the Regimen of the School of Salernum, which is much prized by collectors and scholars. He was also a profound theologian and had a greater knowledge of theological dogma and ecclesiastical history than most clergymen and professors of theology. In the legal profession he was recognized as a keen, close reasoner and was employed in many celebrated cases.

He suffered from great depression at times, and was then well-nigh inaccessible even to his intimate friends.

He died January 20, 1908.

DR. GEORGE CULVER PALMER.

Dr. George Culver Palmer died at Oak Grove, Flint, Mich., August 17, 1894.

He had been in somewhat impaired health for several years, his failure dating from an attack of pleurisy in 1888, but he did not become seriously ill until April, 1893.

Dr. Palmer was born in Stonington, Conn., December 27, 1839. His early education was obtained in the country schools. He prepared for Brown University at the Connecticut Literary Institute at Suffield, but subsequently changing his plans entered the University of Michigan in 1860, where he spent one year, subsequently entering the medical department and graduating therefrom in 1864. Immediately afterward he received an appointment in the Asylum for the Insane at Kalamazoo. There he served as assistant physician until 1872, and as assistant medical superintendent for the following six years. In 1878 he was elected medical superintendent, which position he occupied until 1891, when he resigned to assume the duties of medical director of Oak Grove. Although his contributions to medical literature are not numerous, he was a vigorous, forceful and persuasive writer. He distrusted his ability to write and once remarked that "some people write for fame but I because I must." The satisfactory development of the colony system in Michigan was largely due to his efforts, and the opponents of state care of the insane found in him a determined, steadfast and earnest adversary.

DR. JOHN G. PARK.

John Gray Park, A. B., M. D., was born in Groton, Mass., January 3, 1838, the son of John G. and Maria (Thayer) Park. He graduated at Harvard University with the degree of A. B. in 1858. While pursuing the study of medicine at the Harvard Medical School in 1861 he became an interne at the Massachusetts General Hospital. In February, 1862, he was appointed an acting assistant surgeon in the U. S. Navy and served as such until November, 1865, when he was honorably discharged. He resumed his medical studies and received the degree of M. D. in 1866, soon afterwards opening an office in Worcester, Mass. In 1871 he was appointed superintendent of the Worcester City Hospital, then just opened. In October, 1872, he married Elizabeth B., daughter of Hon. A. F. Lawrence, of Groton, and in the same month received an appointment as assistant superintendent of the Worcester Insane Hospital which position he filled until 1877, when upon the transfer of Dr. B. D. Eastman, the superintendent to the Worcester Lunatic Hospital, he was made superintendent of the Worcester Insane Asylum, then converted into an institution for the chronic insane. Upon the retirement of Dr. B. D. Eastman as superintendent of the Worcester Lunatic Hospital in 1879 he was appointed his successor and served the institution efficiently and continuously until his retirement in 1890. He spent the summer of 1881 in Europe and devoted special attention to English methods of caring for the insane.

In his career as superintendent he had high ideals of professional duty and labored indefatigably to attain them. The circular observation wards which he built for suicidal patients attracted much attention and were regarded a new departure in the care of such patients. He also perfected the superb institution over which he had been placed, and was ever a sagacious and prudent administrator. He was an excellent organizer and a good man of business, and under his management the Worcester Lunatic Hospital enjoyed a deserved prosperity. The failure of his health in 1890 led him to go to the Pacific Coast for a long vacation, which, unfortunately, did not fully restore him to health, and his resignation followed. He then removed to his former home at



DR. J. G. PARK.

Groton, Mass., where he continued to reside until his death, although several winters were passed in California.

In 1894 he was appointed by the Governor one of the commissioners to build the Medfield Insane Hospital, and when the hospital was completed and opened he became chairman of the Board of Trustees, a position which he held during the remainder of his life. He was much interested in the work of this hospital and gave much time and thought to his public duties in connection with it.

His health gradually failed and he finally entered the Worcester City Hospital for treatment, where he died of cirrhosis of the liver, August 29, 1905. His wife died after a lingering and distressing illness in 1903. One son, Lawrence Park, an architect of Boston, living in Groton, survives him, together with three grandchildren.

DR. RALPH LYMAN PARSONS.

Ralph Lyman Parsons was born July 30, 1828, at Prattsburg, Steuben County, N. Y. He received his early education at the Franklin Academy of that town, subsequently continued his studies at Amherst College, where he graduated in 1853, and pursuing his medical studies in the New York Medical College, graduated M. D. from that institution in March, 1857. Until 1860 he was assistant physician at the New York City Lunatic Asylum, and from 1862 to 1865 in private practice in New York and visiting physician to De Milt Dispensary. In 1865 he became medical superintendent of the New York City Lunatic Asylum, and filled that position for 12 years.

He served most faithfully during epidemics of typhus fever and cholera which destroyed the lives of many patients. During this trying period he had an overcrowded institution, untrained attendants and an inadequate number of medical assistants, deficiencies in diet and clothing and lack of facilities for proper classification. He utilized the pavilion system of building on Blackwell's Island and favored the isolation of epileptic patients, and his patients are said to have formed the nucleus of the first epileptic hospital in these pavilions under the charge of Dr. Echeverria.

In 1877 and 1878 he was medical superintendent of Kings County Hospital for the Insane. Upon his retirement he was in private practice again in New York for two years. In 1880 he established a private sanitarium for mental diseases at Sing Sing, later Ossining, N. Y., where he died in February, 1914, at the age of 86 years. He retained his mental and physical activity until his death.

DR. T. O. POWELL.¹

T. O. Powell was president of the American Medico-Psychological Association during its session in Baltimore in 1897.

He was born in Brunswick County, Va., in 1837, and was in his 70th year at the time of his death. His father moved to Georgia when he was a child and he received his academic and his professional education in that state—his medical diploma from the college in Augusta, in 1859. During the Civil War he enlisted in the Confederate Army and was assistant surgeon of the 49th Georgia Regiment. He accepted the appointment of assistant physician in the State Institution for the Insane at Milledgeville in 1862 and held the position for 17 years under Dr. Green, who died in 1879. He was promptly elected his successor. For 28 years he remained superintendent, until his death. For 45 years he was a medical officer in the same state institution. It speaks well for Georgia, that for so long a time politics were not allowed to interfere with the official management of its insane. He saw his hospital grow from a few patients to one of the largest in this country, numbering nearly 3000 patients at the time of his death.

After a long period of ill health he died from acute pneumonia at Tate Springs, Tenn., August 18, 1907.

ENOCK PRATT.

Enoch Pratt was born in Middleborough, Plymouth County, Massachusetts, September 10, 1808, and died September 17, 1896.

He was the son of Isaac Pratt and Naomi (Keith) Pratt, who was descended from Phineas Pratt, who came to Plymouth, Massachusetts, on the ship *Ann* in 1623.

¹ By Dr. J. T. Searcy.

After serving an apprenticeship of six years in a Boston store, Enoch Pratt moved to Baltimore in 1831 and engaged in business. He founded the successful wholesale iron house of E. Pratt and Brother, and was for many years president of the National Farmers' and Planters' Bank of Baltimore. He was also connected as officer or director with various financial institutions and charitable establishments. He was one of the managers of the Maryland Hospital for the Insane, Spring Grove, Catonsville, shortly after the Civil War.

In 1882 he presented a plan to the Mayor and the City Council of Baltimore for the establishment of a circulating library for the residents of the city, expressing his wish that the library and its facilities should be open to all "rich and poor without distinction of race or color when properly accredited." He gave to the city a sum of more than \$800,000, with the request that the city should create in return a perpetual annuity of \$50,000 for the support and maintenance of libraries, to be paid to a Board of Trustees selected by Mr. Pratt and vested with powers of self perpetuation. The Central Library was completed and turned over to the trustees in 1884 and since that time many branch libraries have been established.

Upon his death, as narrated elsewhere,¹ it was found that his will made The Trustees of the Sheppard Asylum his residuary legatee upon the condition that at the first session of the Legislature after his death they obtain an amendment of their charter, changing the corporate title to The Trustees of the Sheppard and Enoch Pratt Hospital. Mr. Pratt stated specifically in his will that he did not wish to alter the operations of the institution as then carried on, but desired that the income from his benefaction be used for the completion of the buildings then in use and improving the grounds and that subsequently the income be devoted mainly to the care of indigent patients either free or at such low rates as seemed best in the judgment of the trustees. The sum received from his estate was over \$1,175,000, and the income has permitted the trustees annually to care for an increased number of patients who are unable to pay for their care and support or able to pay minimum rates only, to which charitable ends the in-

¹ See Vol. II, p. 565, history of The Sheppard & Enoch Pratt Hospital.

come from Mr. Sheppard's bequest had been devoted as far as possible prior to the reception of the bequest of Mr. Pratt.

The two sums donated by Moses Sheppard and Enoch Pratt remain intact and represent a benefaction devoted to the care of the insane larger than had ever been before given for the same purpose in the United States.

DR. FOSTER PRATT.

Foster Pratt was born at Mt. Morris, N. Y., January 9, 1823. His father, the Rev. Bartholomew Pratt, was of English descent; his mother, Susan (McNair) Pratt, of Scotch Irish. Their ancestors landed in Plymouth in 1622. He had his early schooling at Franklin Academy, Prattsburg, N. Y.; then being thrown on his own resources at the age of 17, he taught school for seven years. In 1847 he entered the University of Pennsylvania, taking his degree of M. D. there in 1849. He began practice at Romney, Va., and soon acquired a large clientele, but removed to Kalamazoo, Mich., in 1856.

In 1858 he was elected to the State Legislature on an independent ticket, where, in the face of strong opposition, he secured an appropriation of \$100,000 for the completion of the Michigan Insane Asylum at Kalamazoo, the first large appropriation made by the state. At the beginning of the war he assisted in raising the 13th Regiment of Michigan Volunteers, and was appointed surgeon. He remained with it through the war, accompanied Sherman in his march to the sea, and was mustered out at Louisville, Ky., in 1865, resuming practice at Kalamazoo. He was president of the Michigan State Medical Society and an honorary member of the American Medico-Psychological Association. In his presidential address before the State Medical Society of 1877 he pointed out the defects in the educational methods of the medical profession and insisted that the only remedy was a more perfect medical organization. He gave much time to promoting in Michigan a better preliminary education of medical students; a more thorough technical training; the management of professional affairs by professional men, and the promotion of the organization needed to secure conditions essential to a proper

evolution of the profession. Dr. Pratt was a man of striking personality, tall, well-proportioned, handsome, and a born leader.

He died suddenly at Kalamazoo, Mich., August 12, 1898, from heart failure following occasional attacks of angina pectoris.

The following are some of his published papers: "Legal Relations of Insane Patients" (Transactions of Michigan State Medical Society, 1878); "Legal Responsibility of Surgeons for Ununited Fractures" (Transactions of Michigan State Medical Society, 1882); "Immigration and Insanity" (a paper presented to the American Medico-Psychological Association in 1886).

DR. ROBERT J. PRESTON.

Robert J. Preston, the son of John F. Preston, of Washington County, Va., was born in that county in 1841.

He went as a lad to Emory and Henry College, Virginia, taking the degree of A. M., and then studying medicine at and graduating from the University of Virginia in 1867.

He was a member of the Tri-State Medical Association of the Carolinas and Virginia; honorary fellowship was conferred upon him by the Boston Gynecological Association, the Lynchburg (Va.) Academy of Medicine, and the Medical Society of Virginia (1895).

During the Civil War he served his state first as a private and, later, by promotion as a captain in the 21st Virginia Cavalry, and made for himself a record for gallantry. He joined the Medical Society of Virginia in 1871 and was elected to the presidency in 1894; the same honor was conferred upon him by the Abingdon Academy of Medicine and by the American Medico-Psychological Association in 1892. In 1887 he was elected first assistant physician to the Southwestern State Hospital (for the insane), and in November, 1888, superintendent of the same, which position he filled until his death.

As superintendent of the hospital he made a faithful and popular official; a good disciplinarian, using reason and persuasion rather than harshness and force; he was eminently successful in the management of his patients.

In 1906, while en route for Toronto, Can., to attend a meeting of the British Medical Association, he was taken ill at Lewiston, N. Y., and died suddenly at that place on the 20th of August.

His contributions to medical literature were numerous; some of his more important articles were: "Rupture of the Uterus, New Symptoms" (*Virginia Medical Monthly*, Vol. I, 1874); "Report on Advances in Diseases of Women and Children"; (Transactions of the Medical Society of Virginia, 1877); "Puerperal Fever" (*Virginia Medical Monthly*, Vol. II, 1874); "Associated Dining Rooms, Their Moral and Curative Effect," (*Ibid.*, Vol. XVI); "Sexual Vices—Their Relation to Insanity—Causative or Consequent" (*Ibid.*, Vol. XV); "Mental, Moral and Hygienic Therapeutics in Relation to Home Life and in General Practice," president's address to Virginia Medical Society (Transactions, 1895); "Reviews of the Progress, Care, Maintenance of the Insane in Virginia During the Years 1887-1897, Inclusive" (Transactions of the Medical Society of Virginia, 1898); "Rupture of the Carotid Artery—Successfully Ligated" (*Virginia Medical Semi-Monthly*, Vol. VIII).

HON. JOHN V. L. PRUYN.

John V. L. Pruyn, born in Albany in 1811, was descended from one of the oldest families of that city, and became one of its best known representatives. Educated as a lawyer, he early in his legal career displayed high ability in important and complicated cases. His public life, which was exceptionally active, was characterized by a high degree of rectitude and conscientiousness. He never sought office, but was chosen a member of the State Senate in 1861 and of Congress in 1863 and in 1867. His high sense of public duty was revealed when he consented to accept the nomination to the State Senate only upon condition that neither he nor his friends should be called upon to contribute any money, directly or indirectly, to control the vote of an elector; at the close of the session he gave his salary to the poor of the City of Albany. He was one of the original commissioners to erect the new State Capitol, and on July 7, 1869, after placing the first stone of the foundation, he closed some appropriate remarks as follows: "Here may wise laws be enacted; here may purity and integrity of purpose always mark the action of executive power; here may justice, the attribute of deity, be inflexibly administered, and may Almighty God bless the state and prosper the undertaking."

Mr. Pruyn's efforts in the fields of philanthropy and education remain as his most enduring achievements, and yet not in such a way as to identify his name with them. He engaged in work of this character at a time when the evolution of systematic charity was in its infancy, and his influence in the right direction remains in the various institutions which he originated and promoted. When chosen by Hermanus Bleecker to carry out the provisions of his will in the establishment of some public institution for the City of Albany, he transferred the bequest to the late Judge Amasa J. Parker, who utilized the Bleecker fund for the Young Men's Association for Mutual Improvement, now one of the most useful and prominent institutions of the city.

In May, 1844, at the age of 33, Mr. Pruyn was appointed a regent of the University of the State of New York, and in January, 1862, he was chosen chancellor. He was regent for over 33 years, and chancellor for over 15. The Board of Regents is a somewhat unique body, with power of visitation and direction of the educational system of the state, but not directly concerned in the management of the individual institutions. Standards of education are established by this board, which in its organization is entirely free from partisan or political influences.

Mr. Pruyn was also a member of the Executive Committee of the State Normal School at Albany, and president of the board of St. Stephen's College at Annandale, N. Y., a training school of the Protestant Episcopal Church. His direct connection with the interests of the insane in the state came about through his membership in the State Board of Charities, the establishment of which he had suggested to Governor Fenton in 1866; from the time of its organization in 1867 he was its president, with a slight interruption, until his death. The idea governing the organization of the State Board of Charities was to provide supervision for all the institutions in the state which had the care of defectives or delinquents. At that time the management of such institutions was vested in local boards composed of men of high standing in their separate communities. In the interest of public welfare it was thought wise that an impartial and independent body should have the power to review the activities of these institutions and to assist local boards by comparison and study in evolving the best

possible plans of care. It was not the intention of the state at that time to centralize the administration in any general board at Albany, but to afford an opportunity for criticism and advice which would be of assistance. The board has since continued to work upon this admirable general plan.

It is said that to Mr. Pruyn more than to any other man is the state indebted for one of its most valuable and efficient organizations. In his multitudinous labors as a public man he accepted no compensation, and never allowed the state to pay even his traveling expenses, but gave his time and energy freely. He also availed himself of every opportunity of encouraging letters, art and good work.

DR. HENRY K. PUSEY.

Dr. Pusey was born January 2, 1827. His parents both belonged to Quaker families, and were Marylanders, who settled at Garnettsville, Ky., in 1822. His education was obtained in the local schools. At 18 years of age he entered the office of Dr. Bryan R. Young, at Elizabethtown, a prominent physician in Kentucky. Afterwards he entered the University of Louisville, where he graduated in 1848, and began practice at Garnettsville. Here for 35 years he led the life of a busy country practitioner, wielding a wide influence in his profession and in the community. In 1883 he retired from practice and removed to Louisville, to spend the remainder of his life in retirement, but had hardly reached Louisville before he was appointed to take charge of the Central Asylum at Lakeland, and accepted the position. The asylum then had 553 patients, 400 of whom were well housed, but crowded into two large buildings, where careful classification was impossible; the remaining 150 in two old frame buildings no longer suitable for habitation. There was no adequate water supply or sewerage system; the heating arrangements and the fire protection were insufficient and bad; the only means of artificial illumination was by kerosene lamps. The problems of water supply and sewerage were so grave as to threaten the existence of the institution. Added to this, the asylum finances had shown for the year previous a deficit of over \$10,000.

On the other side of the account there was an appropriation of \$30,000 available for a new building.

In June, 1888, the newly elected Governor, S. B. Buckner, called for Dr. Pusey's resignation, for political reasons. The displacement of Dr. Pusey provoked widespread and severe criticism throughout the state; and, probably in order to shield himself, the Governor and his superintendents undertook, by intimation, to cast reflections upon the administration of Dr. Pusey from an economic standpoint—probably they felt the hopelessness of any attack, even indirect, from a humanitarian standpoint. The reply which Dr. Pusey immediately published left nothing to be desired.

On the election of Governor Brown, in 1891, Dr. Pusey was again asked to take charge of the Central Asylum. During the interim of his retirement his interest in the asylum work of the state had not flagged.

When he re-entered the asylum he found things practically as he had left them, except for the reduction, under a false effort at economy, of the annual per capita from \$150 to \$135. He was, therefore, able to take up his work practically at the point where he had left off, and he at once began to work along the lines pursued during his first administration of the institution. During his second administration he had the satisfaction of seeing practically all of the measures for which he had worked brought to a successful issue.

He left the Central Asylum in the summer of 1895, this time feeling sure that his lifework was ended, and hoping that with rest he would regain his health. His health, however, gradually grew worse, and, finally, becoming very nervous and being greatly worried by the city noises, he left Louisville and went to his country home at Garnettsville. There, after an illness of a few weeks, he died in his 70th year, on September 1, 1896.

DR. MARK RANNEY.

Dr. Mark Ranney, superintendent of the Iowa Hospital for the Insane at Mt. Pleasant, died of acute pneumonia, January 31, 1882.

He was born in Westminster, Vt., July 7, 1827. His early education was obtained in the schools of his native state. He

studied medicine in the offices of eminent physicians in Providence and Boston, and graduated from the Vermont Medical College at Woodstock in 1849.

Soon after graduation he was appointed an assistant physician to the Butler Hospital at Providence, R. I., then under the charge of Dr. Isaac Ray.

After five years at the Butler Hospital he accepted an appointment at the McLean Asylum at Somerville, Mass., under Dr. Luther V. Bell.

In 1865, after a thorough training of more than 15 years as assistant physician, he was made superintendent of the Iowa Hospital for the Insane at Mt. Pleasant.

In 1872, in consequence of legislation affecting the management of the hospital, which he thought would seriously hamper his work, he resigned his position, intending to retire from hospital work, but being invited by the trustees of the hospital at Madison, Wis., to become superintendent there, he accepted the position.

After less than two years at Madison, a vacancy occurring in the management of the Iowa Hospital, by unanimous vote of the trustees he was invited to return and assume its management in July, 1874, and thereafter was its executive head until his death.

Dr. Ranney was an expert in hospital organization and management and the care and treatment of the insane.

In the daily work of the hospital nothing was too small to merit his consideration ; his ability to grasp and carry in mind the details of hospital work was unusual. His executive ability was supplemented by rare good judgment outside of strictly professional matters.

For several years he was lecturer on insanity in the medical department of the Iowa State University, to the complete satisfaction of the faculty and students. He gave much attention to the jurisprudence of insanity, and his services as an expert witness were frequently in demand in the courts of Iowa.

DR. ISAAC RAY.

Dr. Ray was born at Beverly, Mass., January 16, 1807, and died in Philadelphia March 31, 1881. His literary education was received at Phillips Academy and Bowdoin College, where he de-

frayed his expenses by teaching school during the vacations. He commenced the study of medicine in the office of Dr. Shattuck, of Boston, and graduated at Harvard Medical School in 1827 and entered upon the practice of medicine in Portland, Me. He soon moved to Eastport, Me., where, in 1838, he published his first work, "The Medical Jurisprudence of Insanity," a book which has passed through many editions, and has been largely quoted by criminal lawyers.

In 1841 he was appointed superintendent of the State Hospital for the Insane at Augusta, Me., where he remained till 1846, when he accepted an appointment to the superintendency of the Butler Hospital, at Providence, R. I. After a short visit to Europe, and an examination of some of the principal institutions of England and the Continent, he returned to Providence and supervised the construction of the buildings for the Butler Hospital, which was finally opened in 1847. In this work he had the assistance of Dr. Bell of the McLean Asylum, who contributed materially in the arrangement of the details. At Butler Hospital, Dr. Ray remained a laborious administrator and faithful student until the year 1867, when, from considerations of health, he resigned, and removed to Philadelphia.

He was one of the "original thirteen" who, in 1844, organized the "Association of Medical Superintendents of American Institutions for the Insane," and was its president from May, 1855, to May, 1859. In 1863 he published a second work, entitled, "Mental Hygiene," and in 1873 a third, entitled "Contributions to Mental Pathology," a title which covered such "contributions" as he had already made in the way of papers, review articles and reports pertaining to insanity. In Philadelphia, where his health improved, his life was far from an idle one. Besides frequent calls upon him for professional consultations, and expert testimony in criminal cases before the courts or in testamentary disputes, his pen was constantly engaged upon work for the medical and literary journals and papers for the various associations to which he belonged. Dr. Ray was seldom or never absent from the meetings of the Association of Medical Superintendents, and kept up the liveliest interest in its discussion up to the time of his death.

Dr. Ray was also an interested reader of religious works, and a man of strong religious conviction. His funeral took place at

Providence, from the chapel of the Butler Hospital, where his principal life work had been, and the interment was in the adjoining cemetery. The Congregational minister who officiated testified in an emphatic manner to the depth and reality of his religious character, as well as to the eminence and beneficent influence of his scientific attainments.

DR. JOSEPH ALLISON REED.

Dr. Joseph Allison Reed, superintendent of the Western Pennsylvania Hospital at Dixmont, died December 6, 1884, after an illness of several years; for a year before his death he had been unable to leave his room.

He was born in Washington, Pa., December 31, 1823, and was in the 61st year at the time of his death. He was educated at Washington College, and became Master in Arts in 1842. He received the degree of Doctor of Medicine at Jefferson Medical College in 1847. He settled in Allegheny and became especially successful in the treatment of mental disorders. Owing to this success, in 1857 he was solicited to take charge of the Western Pennsylvania Hospital, which needed a competent executive head. He accepted the position and in a year placed the institution on a sound financial basis. After seven years as physician-in-charge he became superintendent of the insane department, and held the position until his death.

On several occasions he had desired to resign because of ill health, but the directors refused to accept his resignation; at a meeting of the Executive Board of the hospital, held a week before his death, he was given a six-months' leave of absence, with the hope that complete rest and freedom from anxiety might so improve his health as to enable him to resume his duties.

Until incapacitated by sickness he was an active worker and deeply interested in everything connected with the welfare of the patients under his charge.

DR. ALBERT REYNOLDS.

Dr. Albert Reynolds was born at Grand Island, Vt., in 1837, and died in Clinton, Iowa, February 23, 1899. His education in letters and in medicine was acquired in his native state. He served two

years as a volunteer in the Civil War. While Dr. Edwin R. Chapin was superintendent, and Dr. Carlos F. MacDonald an assistant physician, he was a member of the staff of the Kings County Lunatic Asylum at Flatbush, N. Y.

He located in Clinton, Iowa, in 1867, and there married.

In 1873 he became superintendent of and opened the Hospital for the Insane at Independence, Iowa.

After a faithful and successful service, he retired from office in 1881 on account of failing health, and resumed private practice in Clinton. He continued in the active practice of his profession until a few weeks before his death.

He lectured upon insanity in the Medical Department of the State University of Iowa for several years. He was held in unusual esteem by his patients and in the homes visited by him.

DR. ALONZO B. RICHARDSON.

Alonzo B. Richardson was born near Harrisonville, Scioto County, Ohio, September 9, 1852, and died in Washington, D. C., June 27, 1903.

He entered the Ohio University at Athens at the age of 18, and remained for two years, when he entered the Ohio Wesleyan University, which he attended for nearly two years, but was absent a portion of one year to teach in a country school. In 1874 he entered a medical college at Cincinnati, and the next year went to Bellevue Hospital Medical College, New York City, where he graduated in 1876.

Returning to Ohio, he received an appointment as assistant physician under Dr. Richard Gundry at the Athens State Hospital.

In 1878, when, by a political reorganization of the institution, a new management was installed, he removed to Portsmouth and began the practice of medicine. In 1880, on the transfer of Dr. H. C. Rutter from the hospital at Athens to that at Columbus, he was elected his successor at Athens. He remained there until 1890, when, after a political reorganization, he removed to Cincinnati, and entered upon the practice of the specialty of nervous and mental diseases. In 1892, without solicitation or suggestion on his part, he was elected superintendent of the Columbus State Hospital. He retained this position until the completion of the

new hospital at Massillon in 1898. He had been one of the trustees of this institution and largely shaped its plans and took a deep interest in its construction. He was made its first superintendent, and had the task and the privilege of completing an enterprise which he had fostered and guided from its beginning.

He had scarcely completed the organization of the hospital at Massillon when a vacancy occurred in the superintendency of the Government Hospital for the Insane in Washington, D. C., which in October, 1899, he was appointed to fill. His work there was enormous and made heavy drafts upon his energies. Through his efforts liberal appropriations were secured, additional land was bought, and plans were adopted for a greater enlargement of the institution. But before these plans could be realized he died suddenly of apoplexy.

DR. DAVID DORRINGTON RICHARDSON.

David Dorrington Richardson was born May 11, 1837, at Richmond, Va., and died March 6, 1906, at Norristown, Pa.

His preparatory education was gained at Transylvania University, Lexington, Ky., from the Medical Department of which he was graduated as a Doctor of Medicine after three courses of lectures in February, 1858. He removed to Philadelphia the following spring and organized a successful school to prepare students for their degrees and physicians for the army and navy examinations.

He served from 1858 to 1861 as interne in the Howard and Philadelphia hospitals. In 1861 he was appointed resident physician of the Northern Dispensary of Philadelphia, and held this position until December, 1866, when he was appointed superintendent and physician-in-chief of the Philadelphia Hospital, Department for the Insane. In 1871 he received the degree of M. D. from the University of Pennsylvania Medical Department. In 1879 he was appointed superintendent of the State Hospital for the Insane, Warren, Pa., and served until July, 1881, when he was recalled to the Philadelphia Hospital. He remained until 1886, when he retired to engage in private practice. Institutional life and work were, however, more attractive to him, and in 1889 he took the superintendency of the hospital at Farnhurst, Del., which

he organized and conducted until 1893, when he resigned to take charge of the male department of the State Hospital at Norristown, Pa., and remained until his death.

For eight years he was demonstrator in the Philadelphia School of Anatomy, under the late Dr. D. Hayes Agnew. He was also assistant demonstrator of anatomy in the University of Pennsylvania for several years.

Dr. Richardson published the "Chemical Remembrancer"; "Old and New Notation of Chemistry Reconciled," and "Clinical Lectures on Insanity." He was a member of the American Medical Association, of the American Medico-Psychological Association, the Philadelphia County Medical Society, and the Philadelphia Neurological Society.

DR. WILLIAM H. ROCKWELL.

Dr. William H. Rockwell was born in East Windsor, Conn., February 15, 1800. He graduated at Yale College in 1824, and from the Medical Department of the same institution in 1831. In 1827, while a student of Dr. Hubbard at Pomfret, Conn., he was appointed assistant to Dr. Todd, of the Hartford Retreat, and remained connected with it for the greater part of the time thereafter until his appointment to the Vermont Asylum, June 28, 1836. During the illness of Dr. Todd and until the appointment of Dr. Fuller, he had charge of the Retreat, and wrote the report for 1834.

He was prevented from attending the first meeting of the association by reason of a bill pending in the Legislature of Vermont which demanded his attention in the interests of the insane. Tall, robust and vigorous in appearance, of a kind, gentle and pleasant disposition, he was eminently a practical man, giving special care to the occupation of his patients and laboring earnestly for their benefit in every way in his power.

Few men possessed such qualifications for surmounting difficulties as he, and the history of the institution at Brattleboro gives evidence of his indefatigable energy. He was pre-eminently self-reliant, and though he differed from some of his colleagues in matters of practical management, he was scrupulously faithful to his convictions and to his trusts.

For a year and a half preceding his death he was confined to his bed by a fractured limb, and while gradually wearing away, and sinking to final rest the strong points of his character shone out with striking brilliancy. Realizing that his work was done, and that he had done it faithfully, he expressed his willingness to be judged by it; undisturbed by the shafts of malice and indiscriminate censure, he calmly observed "that his work would be better appreciated and his motives better understood after he had gone." He died on the 30th of November, 1873.

DR. JAMES RODMAN.

Dr. James Rodman was born in New Castle, Ky., in 1829. He graduated from the University of Louisville in 1849. In 1863 he was appointed superintendent of the Western Hospital for the Insane at Hopkinsville, and retained this position until 1889, when he resigned, much to the regret of all who knew of the excellence of his work. He was highly regarded as an administrator and practical alienist, although, as he wrote and published little, his reputation was largely confined to the region in which he lived. He was the first superintendent of the Institute for the Feeble-minded at Frankfort, Ky.

He died January 10, 1902, at Hopkinsville, Ky.

DR. JOSEPH GOODWIN ROGERS.

Joseph Goodwin Rogers was born in Madison, Ind., November 23, 1841, the son of Dr. Joseph H. D. and Abby Goodwin Lane Rogers. His father was a giant in stature and of great force of character as befitted a pioneer physician in Indiana and Kentucky at an early day. His mother was a gentlewoman of refined and cultivated tastes. From his father he inherited a sturdy, forceful and strong character; from his mother refined tastes, high ideals and an artistic temperament. His education was largely derived from his mother, as at the early age of eight he suffered from Pott's Disease and for many years was confined to his bed. He became a diligent student and an omnivorous reader of good books and was self-taught to a remarkable degree. At the age of 18 he began to study medicine under his father's direction, later at the Cincinnati College of Medicine, and Bellevue Hospital Medical

College, New York, receiving from the latter the degree of M. D. in 1864. He served as a surgeon in a military hospital until the close of the Civil War, and then went abroad for two years of travel and study. He fitted himself to practice as an ophthalmologist, and upon his return entered upon a successful career at Madison, Ind.

In 1879 he was offered the superintendency of the Indiana Hospital for the Insane at Indianapolis, which he accepted as a duty to the public after much hesitation and at great personal sacrifice. For four years he devoted himself to the reorganization and development of the hospital and freed it from political and partisan interference. He proved to be too much in advance of public opinion and preferred to retire with honor rather than to sacrifice high ideals of right and duty.

His special fitness for hospital management, however, had been proved and in 1883 he was selected by the Governor and a newly appointed commission to be medical engineer for the erection of three hospitals for the insane. He entered upon his duties with enthusiasm and energy and at the end of five years had planned and erected the Northern Hospital at Logansport, the Eastern Hospital at Richmond and the Southern Hospital at Evansville, three modern hospitals, fully abreast of the most advanced ideas of hospital construction. Singularly enough, they were exponents of three distinct hospital types, the pavilion, the cottage and the radiate plans respectively, and stand to-day as monuments of his ability and versatility.

When he had completed his labors as medical engineer he was offered the choice of the superintendency of whichever one of the hospitals he might prefer. He chose the hospital at Logansport, and from May, 1888, until the day of his death continued in medical charge of it. Under his skilled direction the Northern Hospital, in physical economy, humane methods and medical care, reached the highest development.

Amid his varied duties and lines of activity, he remained essentially a physician whose professional attainments were of a high order and he kept abreast of the progress of general medicine and psychiatry.

His writings include a long list of reports, state papers, and monographs, all of which were carefully prepared.

In 1885 he received the honorary degree of Doctor of Philosophy from Hanover College. In 1900 he was president of the American Medico-Psychological Association at the Richmond meeting and delivered an illuminating address on "Hospital Construction." For four years he filled the chair of materia medica and therapeutics at the Indiana Medical College at Indianapolis.

In June, 1872, he married Margaret Watson, of Bedford, Pa., who, with three daughters and two sons, survives him. His home life was perfect and in it as husband and parent he found the greatest happiness of his life.

He died April 11, 1908, of chronic nephritis, after a long illness at the Northern Indiana Hospital, Logansport.

DR. GEORGE HENRY ROHÉ.

The parents of Dr. Rohé, John and Mary Fuchs Rohé, were natives of Bohemia, and he was born in Baltimore on the 26th of January, 1851, and educated in the public schools, afterwards studying medicine with Dr. F. Erich and taking the degree of M. D. at the University of Maryland in 1873. For some years afterwards he was connected with the U. S. Signal Service, but while in Boston studied dermatology and after leaving the Signal Service became assistant to Dr. Erich, professor of gynecology in the College of Physicians and Surgeons, Baltimore, and also lecturer on dermatology. Appointments followed quickly; the professorship of obstetrics, of therapeutics and mental diseases; the superintendency of Spring Grove Hospital for the Insane, and later the superintendency of the Springfield State Hospital which he organized at Sykesville, Md.

For a year prior to his death he had symptoms of cardiac trouble and his death came suddenly on February 6, 1899, while he was attending the National Prison Congress at New Orleans.

He contributed largely to dermatology, but his work culminated in the field of psychiatry, when he began the work of planning a hospital for mental diseases upon the most advanced ideas.

Dr. Rohé's contributions to medical literature were numerous and useful. The most important were his "Textbook of Hygiene," first edition, 1885, third edition, 1894; "Practical Manual of Skin Diseases," 1885-1886, and (with Lord) 1892; "Electricity

in Practical Medicine and Surgery" (joint author with Liebig), 1890. He was associate editor of the *Independent Practitioner*, 1882, and of the *Annual of Universal Medical Science*, 1890, and editor of the *Medical Chronical*, 1882-1885. Among other offices, he was president of the American Association of Obstetricians and Gynecologists, 1893-1894; president of the Medical and Chirurgical Faculty of Maryland, 1893-1894; president of the American Public Health Association, 1898-1899. The honorary degree of A. M. was conferred upon him by Loyola College, Baltimore.

Dr. Rohé possessed a phenomenal memory, accompanied by great readiness in applying his knowledge. He was an industrious reader and had acquired a knowledge of several languages.

DR. EDWARD C. RUNGE.

Dr. Edward C. Runge was born in St. Petersburg, Russia, in 1856, and died in St. Louis, Mo., of acute pneumonia, February 10, 1904. His parents, who were both German, carefully looked after his early education, which was acquired in various schools in his native city. His familiarity with the classics as well as with modern languages, higher mathematics and elementary sciences, was well known to his intimate acquaintances.

It was his intention to study medicine at the close of a college course. The death of his father, however, made it necessary for him to leave school at the age of 18, in order to assist in the maintenance of the family. After several years he came to America, and to St. Louis in 1883. He began the study of medicine in 1888 at the St. Louis Medical College, and graduated in 1891. He found the struggle of completing his medical course without financial assistance a hard one; but he was courageous and patient and satisfied only when he had attained the highest standards. His excellent qualities and personal accomplishments gained many friends in the city of his adoption, and he was highly esteemed by the members of the medical faculty. During his senior year he was instructor in physiological chemistry, and a year after his graduation continued the same work for a period of four years. At the same time he was assistant in the neurological clinic at the St. Louis Medical College. During this period he wrote an attractive paper on "Merycism." The amount of original work

shown in this paper astonished those who knew that he had no assistance in its preparation. He was familiar with the chemic problems involved, however, and in its preparation he read everything that he could get his hands on, sending to Washington and elsewhere for many volumes. A paper on "Syringomyelia" a year or so later was prepared in the same thorough and brilliant manner, and at the time it appeared was a valuable contribution to the subject. These two earlier communications are mentioned particularly because they illustrate how at the beginning of his medical career he employed the same thorough methods of work that later became well known to the members of this association.

For a period of about four years Dr. Runge was in private practice in St. Louis. In 1902 he married Miss Emily Foote of St. Louis, who survives him.

His institutional work began in 1895, when he was appointed superintendent of the St. Louis Insane Asylum, which office he held for nine years. He instituted many improved methods in the institution. Political interference compelled his resignation at a time when he was most useful. He died suddenly of pneumonia a few days after he left the asylum.

DR. IRA RUSSELL.

Ira Russell, M. D., was born at Rindge, N. H., in 1814, and died at Winchendon, Mass., December 19, 1888. He was of English and Huguenot descent, and attained a college and professional education by his own exertions. He practiced medicine at Winchendon and Natick, Mass., until the outbreak of the war. He was then 47 years of age.

In 1861 he was commissioned surgeon of the 11th Massachusetts Volunteers, and in April, 1862, was made brigade surgeon of General Gover's command at Yorktown. In the same year he organized the Jarvis Hospital in the Stewart Mansion in Baltimore, and later was ordered to St. Louis to organize the Lawson Hospital, but was soon after appointed medical director of Northwestern Arkansas, where he had charge of all the wounded from the battle of Fayetteville, earning great credit for his medical history of that event.

Early in 1863 he returned to St. Louis, and under his charge the Benton Barracks Hospital became one of the largest hospitals in the West. Later he was upon the staff of General Thomas, and organized the Wilson Hospital at Nashville, Tenn., of which he remained in charge to the close of the war. He was made brevet Lieutenant-Colonel in June, 1865; and resigning from the service, he was engaged in preparing the "Medical and Sanitary History of the War" by the U. S. Sanitary Commission.

In 1867 he returned to his professional labors at Winchendon, where, about the year 1875, he opened a private asylum for the treatment of nervous and mental diseases, and successfully established it upon a permanent basis. He diligently continued his labors in this and other professional work until his last illness, dying from pneumonia at the age of 74 years. In addition to his membership in the Association of American Superintendents, he was also a member of state and national medical societies, and contributed to the literature of his special professional work.

He was one of the professional men who, already in middle life, carried into the service of his country that preparation which practical experience had given him and made him invaluable to her armies. That his duty was well done is told in the brief enumeration of the important hospital commands which he held.

The record shows that he bore the test of quality in his work, under responsibilities he would not have been permitted to carry without merit. His life was one of vigorous and honorable activity and usefulness to the end, and well spent beyond the allotted years.

DR. BIGELOW T. SANBORN.

Dr. Bigelow T. Sanborn, superintendent of the Maine Insane Hospital, at Augusta, died April 18, 1910, from cerebral hemorrhage.

He was born in Standish, York County, Me., July 11, 1839. He came from a family which represented the best New England traditions of the Colonial period. His preliminary education was obtained at the Limington Academy. In 1866 he graduated with honors from the Medical School of Bowdoin College and was appointed the same year an assistant physician at the Maine State Hospital, where he remained in continuous service 44 years.

In the early part of his long service he was fortunate in serving under Dr. H. M. Harlow, for whom he felt the highest respect and affection and to whom he never ceased to pay loyal tribute. In 1882, upon the resignation of Dr. Harlow, he was appointed superintendent of the hospital. It is doubtful if, during such a long service, many men in similar work have been so congenially situated. The great majority of his patients were member of families whom he had known from boyhood. His interest in his duties, personal regard for the welfare of his patients and consideration for the employees of the hospital were repaid by universal confidence and respect throughout the state, by peculiarly tender relations between his patients and himself, and by the gratitude and affection of a long list of subordinates.

His personality fully merited the generous consideration accorded him by the people of Maine. Kindly, sympathetic and of unimpeachable integrity and character, with a keen sense of humor and fondness for his fellow men, his memory deserved the resolutions adopted by the Board of Trustees after his death:

The decease of Dr. Bigelow T. Sanborn removes one of the most distinguished and beloved citizens of Maine and his unexpected death causes sorrow in every section of the state. His intelligence, general ability and warmth of heart, of which there is so much evidence in the records of our state, have exerted such an influence that his name can never be forgotten. Such a character naturally found its expression in an important and influential life, and its loss is a source of sorrow to the State of Maine.

Aside from his official duties, Dr. Sanborn was actively interested in the social and charitable work of Augusta, and his services in medical consultations and medico-legal work were in frequent requisition until the end. In this latter work bench and bar alike had such confidence in his judgment and integrity that his opinions were rarely questioned.

He was a member of the Medical Club of Augusta, the Kennebec Medical Society, the Maine Medical Association, the New England Society of Psychiatry, and the American Medico-Psychological Association. At the meetings of these bodies he was a regular attendant and frequent contributor of medical papers.

For some time prior to death he had recognized the symptoms of cerebral arterio-sclerosis in himself and had calmly discussed his uncertain lease of life.

DR. JOHN WOODBURY SAWYER.

Dr. Sawyer was born November 5, 1834, in Danvers, Mass., and received his medical degree from Harvard University in 1859. He was appointed an assistant physician at Butler Hospital, Providence, R. I., by Dr. Isaac Ray, then superintendent, and served two years, but resigned to enter private practice in Boston, where he remained but a single year and was appointed first assistant physician in the State Hospital at Madison, Wis. He remained in this position for six years, when he was chosen to succeed Dr. Isaac Ray at the time when the latter resigned the superintendency of Butler Hospital. It was generally understood by his friends that he had been recommended for the position by no less worthy persons than Miss Dix and Dr. Ray. He entered upon his new duties in January, 1867. During the following 19 years he discharged the duties of his position with assiduity, rare wisdom and success.

His manners were gentle and winning; his character was marked by singular modesty, united with great firmness of purpose, rare good judgment, manly independence, self-denying benevolence and unfailing devotion to the duties he was called to perform. He wrote and published little. His whole energies seemed absorbed in the care of his institution.

He died suddenly after a brief illness upon December 14, 1885, in consequence of an injury to his throat by a maniacal patient whom he had visited in consultation with a physician at Newport. He was married and left a widow and one son.

DR. SOLOMON S. SCHULTZ.

Solomon S. Schultz was born in Washington Township, Berks County, Pa., July 5, 1831, near the region in which his ancestor, Christopher Schultz, had settled in 1734, after he had been driven by religious persecution from the Province of Silesia, then in the Kingdom of Prussia. He graduated from Princeton College in 1852, and in 1855 received the degree of A. M. He taught school for a short time, and later commenced the study of medicine with Dr. D. D. Detwiler, of Montgomery County, Pa. In 1856 he graduated from the Medical Department of the University of Pennsylvania, and opened an office in Allentown, Pa. In 1857 he

was appointed assistant physician of the Pennsylvania State Lunatic Hospital at Harrisburg, and discharged the duties of that office with exemplary fidelity until 1862, when he became assistant surgeon in the U. S. Army. He had made meantime a trip to Europe and had spent several months in visiting hospitals for the insane and places of interest upon the Continent. The Civil War broke out during this trip and the first news of it came as he was ascending Mount Blanc in company with some English tourists. The party had begun the ascent of the mountain and had spent the night at the Grand Mulets, when another party of travelers coming up in the morning announced the commencement of the American war. Dr. Schultz continued upward and accomplished what very few Americans could then boast of, the ascent of Mount Blanc. He hastened home and, entering the army as acting assistant surgeon, was subsequently promoted to be assistant surgeon and surgeon of Pennsylvania Volunteers and assistant surgeon and surgeon of U. S. Volunteers, and remained in constant service in hospitals and in the field until the end of the war. He was attached successively to the 75th and 23d Regiments of Pennsylvania Volunteers.

He was surgeon in charge and executive officer successively of the general hospitals at Harrisburg, Pa.; Covington, Ky.; Madison, Ind., and Columbus, Ohio, being also in the latter place superintendent of the hospital.

In 1865 he resigned his commission in the army and commenced the practice of his profession in Harrisburg, when in August, 1868, he was elected superintendent by the commissioners for the erection of the hospital for the insane at Danville. He entered on his duties with characteristic earnestness and fidelity, giving devoted attention to all matters connected with the construction of that institution, and urged forward the work in spite of delayed appropriations, so that part of the building was ready for occupancy in 1872, when the first patients were admitted. He conducted the complicated matters of that hospital in its construction and management with singular fidelity, thoughtfulness and care in regard to the welfare, comfort, happiness and restoration of the patients entrusted to his care, and in the administration of the trust in behalf of the commonwealth and the communities from which patients were sent to the hospital.

He was a man of acute sensibilities, and was greatly annoyed and distressed by malicious attacks on his management of the hospital by those who knew little of his devotion to his duties and earnest efforts to promote in every way the comfort and happiness of his patients.

These attacks, with the added mental strain of conducting a large hospital for the insane, undermined his health. While preparing for a prolonged rest and relief from care in the hope of regaining his health, an unusual accumulation of troubles depressed his vitality to such an extent that he suddenly died September 27, 1891.

While in Harrisburg he was one of the founders of the Dauphin County Medical Society, and its first treasurer. He was for a time recording secretary of the Medical Society of the State of Pennsylvania. On his removal to Danville he became a member of the Mentor County Medical Society. He was an earnest and faithful member of the American Medico-Psychological Association.

“As a truly devout man, Dr. Schultz’s character shone most brightly. Descended from a long line of ‘defenders of the faith,’ he emulated them by being faithful in every religious duty and an active churchman all his life. Wherever he located he connected himself with the church of his denomination, and as an earnest and sincere Christian he ever joined to further the church work. He was a leading member of the Mahoning Presbyterian Church and one of its ruling elders, and as such often and ably represented it in the higher ecclesiastical bodies.”

DR. SAMUEL E. SHANTZ.

Dr. Shantz was born in Canada, educated for his profession partly at the University of Toronto and partly at Cambridge, Mass. He served for a period as surgeon in the army during the Civil War, and was afterwards connected with the New York State Lunatic Asylum at Utica as assistant physician. Here he won the warm regard of his fellow officers for his uniform amiability and gentlemanliness of manner, and his evenly balanced character and attainments. He left Utica to become the superintendent of the Minnesota State Hospital for the Insane. For a

short time previous to his professional engagement in this country he had the great advantage of professional service under the eminent Dr. Joseph Workman, of Toronto.

He discharged his difficult and responsible office with great success. Of a cultivated mind, a kind heart and gentle manners, he attracted the regard of all he met. To these qualities he added a religious spirit and a warm attachment to the church in whose faith and communion he died.

He had married only about three months previous to his death. His life was gentle and pure, and his end was peace.

He died of typhoid fever at St. Peter, Minn., August 22, 1868.

DR. JOHN CARGYLL SHAW.

John Cargyll Shaw was born September 25, 1845, at St. Ann's Bay, Jamaica. After receiving instruction in the local schools he came to the United States with his mother and sister at the age of 17. He first found employment with a wholesale druggist in New York, and attended lectures on chemistry and later studied medicine under Dr. George K. Smith. In 1874 he took the degree of M. D. at the College of Physicians and Surgeons. He showed great interest in the histology and pathology of the nervous system in the laboratory of Dr. Satterthwaite and Prof. Seguin and became clinical assistant to the latter at the College of Physicians and Surgeons.

He was appointed neurologist at St. Peter's Hospital, Brooklyn, and filled the position of medical superintendent of the Lunatic Asylum of Kings County, where he instituted and carried out many needed and praiseworthy reforms. He was appointed lecturer on diseases of the nervous system at the Long Island College Hospital, and advanced to the position of clinical professor of diseases of the mind and the nervous system, increasing his reputation in the field of clinical instruction. Twice president of the New York Neurological Society, he was also elected president in 1893 of the Medical Society of the County of Kings and consulting physician to the State Hospital for the Insane, Poughkeepsie, N. Y., and occupied the position of neurologist in St. Peter's Hospital, the Long Island College Hospital, the Brooklyn Hospital, St. Catharine Hospital, the Long Island Throat Hospital, the Brooklyn Eye and Ear Hospital, and the Kings County Hospital.

He held membership in the New York Neurological Society, the Brooklyn Pathological Society, the American Neurological Society, the Medical Society of the County of Kings, the Neurological Society of Brooklyn, the Medical Society of the State of New York and the Brooklyn Anatomical and Surgical Society.

Dr. Shaw contributed many valuable papers on subjects relating to the nervous system, to medical societies and medical journals. The following may be mentioned: "Muscular Atrophies in Locomotor Ataxia"; "Hemiplegia in Children"; "Progressive Muscular Atrophy and its Pathology"; "Anomalous Cases of Locomotor Ataxia"; "General Paralysis of the Insane"; "The Practicability and Value of Non-Restraint Treatment of the Insane"; "Raynaud's Disease," etc. He contributed to *International Clinics* and for a time was an associate editor of the *American Medical Digest*, and he wrote "Essentials of Nervous Diseases and Insanity."

He died in Brooklyn, N. Y., January 23, 1900.

MOSES SHEPPARD.¹

Moses Sheppard, the founder of the Sheppard Asylum, now known as the Sheppard and Enoch Pratt Hospital, according to a sketch in the *American Journal of Insanity* by J. S. Norris, "was born about six months before the destruction of tea in the Boston harbor," that is, in 1773, but according to Kirk Brown, a life-long student of the genealogy of the Religious Society of Friends, from the records of the Gwynedd, Montgomery Co., Pa., Friends' Meeting, he was born in Montgomery County, Pa., on May 16, 1775. He had said that his "earliest recollection of himself was on an earthen floor in a log cabin near Baltimore," according to Mr. Norris. He was the son of Nathan Sheppard, a native of Cumberland County, N. J., and Sarah Shoemaker, who were married at Abbington Friends' Meeting House, Montgomery County, Pa., March 31, 1755. Nathan Sheppard, owing to his conscientious scruples about war, at the outbreak of the Revolution left Pennsylvania and sought refuge in Nova Scotia, and his lands and possessions were probably lost to him by confiscation or abandonment.

¹ By Dr. E. N. Brush, Towson, Md.

Little is known of the early life of Moses Sheppard beyond certain characteristic references to it in letters written to friends in his later years. In one of these he says: "I have no local attachments from early recollections. Hurried from place to place, always in penury and sometimes in want, these places of my transient sojourn are either forgotten or remembered with pain: hence I have no fond predilection for any favorite spot that gave me birth. Thrown on the world, I soon perceived that I was born the heir to nothing but its trials and labors. Those with whom I was connected by affinity of blood were distant and generally unknown to me: placed among strangers, strangers became my relations: my relations were strangers." In a letter written to Benjamin Hallowell of Alexandria, Va., in 1847, in reply to an inquiry whether he had ever kept school, he writes: "Did I ever keep school? No, never, and what is worse I never went to school." The education which he gained for himself, while not that of the schools, was in many respects an excellent one if it is measured by his knowledge of men and affairs and his insight into questions of the day as shown in his letters and memoranda. Books he read with a discriminating taste, and his comments upon them, especially upon those containing theological questions, evince a refreshing independence of thought and belief. No subject appears to have been considered unworthy of his notice, and his frequent applications for information to numerous correspondents and his inquiries as to books containing such information exhibit an eager search for knowledge, a search which did not slacken even when he had long passed the age of three score years and ten.

He was employed for a time in the general store of Jesse Tyson at Jerico Mills, on the Gunpowder River near Baltimore, where his mother went to reside with her children, Thomas, Ann and Moses, in 1792. In 1793 he was employed in a grocery and provision business in Baltimore, conducted by John Mitchell, and becoming a partner in the following year, remained associated with him for 22 years. Upon the dissolution of the partnership of Mitchell and Sheppard he continued in business until 1824, when he retired with a modest fortune. In 1842 he was elected a director of the Baltimore and Ohio Railroad Company, but declined the position. He was again elected in 1849 and served. In October, 1849, he wrote:

"I invented a method of applying steam to the brake (for controlling railway trains) which was approved and we were preparing to try it when news came from Scotland that the same thing was in course of experiment there."

About 1830 he became interested in African colonization, and in money, clothing, seeds, tools, books, etc., contributed to this cause several thousand dollars. Whatever illusions he entertained as to the possibility of establishing in Liberia a self-respecting, self-supporting colony of former slaves were eventually dispelled after the lapse of some years by the worthlessness and inefficiency of the colored colonists. The following letter will serve as an example of much of his correspondence with such colonists. Under date of 16th October, 1833, he wrote from Baltimore to one Susan Hynson in Liberia, as follows: "I wrote you on the 19th June, received your letter of 24th February last on the 10th of July. You mention and complain of the high price of flour and other American provisions; you have nothing to do with flour or any other article from America; if you cannot live on the productions of the country you had better leave it. I am dissatisfied with the whole tenor of your letters, the burden of them is provisions and fashions from here. There is one fashion which I fear you have never thought of; I mean the fashion of working; if you will adopt that fashion you will soon have plenty of good provisions without sending here for them. You say 'I hope you will send me a box of candles.' In answer to this I say I hope you will get a gallon of palm oil and burn it in a lamp. I can gather nothing from your letters to your mother or to me that indicates industry or usefulness. I believe you have set up for a lady, and I must assure you I will not work in America for a lazy negro lady in Africa." The indifference and shiftlessness of a large proportion of those sent to the Colony, the disposition to depend upon their white friends for support, and their frequent manifestations of gross ingratitude, in time, as suggested above, had their effect, and the plans which tradition informs us Moses Sheppard had made for the benefit of Liberia and its people were replaced by others.

During much of his later life he maintained pupils in private schools by sending funds to support them, and usually added that he wanted no account, and in one case, that of a young woman,

"I don't want to know her name." In making a liberal gift to a female orphan school he annexed the single request that nothing should be printed or published about it.

Self-taught as he was, he evidently read much of history and biography, from the manner in which he discussed questions of public policy, especially as bearing upon the question of slavery and from his numerous references and quotations. In scientific matters he took great interest. Among other books he imported Dalton's "New Theory of Chemical Philosophy," containing the atomic theory, and apparently grasped Dalton's ideas in some measure. He also studied ethnology, being attracted to it by his interest in education and philanthropy. In 1854 he gave utterance to a crude conception of the doctrine of evolution and suggested that man's development from lower orders might be only a step in the upward progress of the race, which might become eventually a still higher and more perfect race of beings in the order of things. About two weeks before his death, after months of confinement to his bed, he asked for pen and paper to test his ability to write. After ruling three distinct lines, because he could not distinguish the fainter lines on the sheet, he wrote these words: "The law of progression is probably a law of nature, of slow development." He then dropped the pen with the remark: "I could add more but it is too late." In Morse's telegraph he took a lively interest and confidently predicted a still more wonderful development of electricity in the transmission of human thought. To Benjamin Hallowell of Virginia, already referred to, he repeatedly wrote to urge him to study the application of electricity to the refining of copper—an application now in very successful use; and the harnessing of the "thunder-bolt" to machinery. He had decided views upon education, which he appreciated highly because he himself had been denied it. He regarded it, however, as only a means to advance the interests of mankind and to uplift those upon whom it was bestowed. Often in his letters to Liberian colonists he cautioned those who had been fortunate enough to obtain an education not to be unduly proud of it and against the fallacy that because they were better educated than some of their fellows they were not to work as hard. For the lazy and indifferent he had no patience and pointed out their faults with a caustic pen. Those who by reason



MOSES SHEPPARD.

of their good "words and works" claimed the aid and support of others did not gain his sympathy or escape his comment. The following letter written in 1853 to Thomas Mitchell is a good illustration of his point of view: "In thy letter thee asks what thee can do in return for some trifles I furnished thee with. I answer nothing, don't send me anything. Thee remarks that thee is employed in providing for the wants of thy family; thee could not be more usefully or honorably, and I will add more religiously, employed. Some Quaker preachers travel, preaching denunciation against a hireling ministry, and leave their families at home to be provided for by others."

What attracted Moses Sheppard's attention to the care of the insane is not known. In a letter to Dr. Shoemaker, of Philadelphia, dated 19, 3d mo., 1853, he says: "My attention has long been directed to the care of the insane; and I expect what I may leave will take that direction and not to individuals." The charter for the Sheppard Asylum was obtained from the Maryland Legislature in May of the same year. In November, 1844, in a letter to Dr. McGill, he says: "I have always believed it to be my duty to feel for human suffering and to mitigate it if I could without reference to the cause," and this seems to have been the principal motive in his mind in founding the Sheppard Asylum. His letters throw little light upon the history of the foundation of the institution, but they all agree in one thing, that he did not seek notoriety or even notice in what he did. He thought at first that he could accomplish his purpose by an ordinary will, but being persuaded to the contrary by his friend, the late David M. Perine, he procured a charter for "The Trustees of the Sheppard Asylum," permitting the use of the word "Sheppard" with reluctance. As soon as his act became public his troubles began. Many persons wrote to request donations from him of sums varying from a few dollars to thousands, for personal benefit or otherwise. He was even approached by a young woman of 17 years of age, who besought his hand in marriage. All this publicity annoyed him exceedingly. In a letter to Mr. John Bigelow of New York in June, 1853, he says: "The whole subject of a hospital is but in the incipient state. My intention was and is experimental, a small but expensive establishment. All of the notoriety has been produced by letter writers and scribblers of newspaper paragraphs—it is morti-

fyng. I want no such chronicles of 'mine living honor.' I thought I could proceed unnoticed without a law, but I was advised not to do so. I am not pleased with the course the affair has taken."

Moses Sheppard was a life-long member of the Society of Friends. He died February 1, 1857, from the infirmities of age. In due time his whole estate, as narrated elsewhere,¹ passed under his will to his trustees.

DR. ABRAM MARVIN SHEW.

Abram Marvin Shew, M. D., was born September 18, 1841, at Le Roy, Jefferson County, N. Y., and was the youngest of a family of 11 children. When 11 years of age he removed with his parents to Watertown, N. Y., where he received his education at the Jefferson County Institute. It was his intention to enter college at Schenectady, but he was prevented from doing so by the outbreak of the war in 1861. Having decided upon his profession, he entered upon the study of medicine at the Jefferson Medical College in Philadelphia as one of the pupils of Prof. W. H. Pancoast. During his course of study his attention was called to the subject of insanity, and he spent some time as an assistant at the New York Asylum for Insane Criminals at Auburn. Immediately after his graduation he passed an examination as an assistant surgeon of volunteers, and was assigned to duty at Hilton Head, S. C., as post surgeon; he remained in this position until the close of the war.

Upon his return to Philadelphia he was appointed one of the resident physicians of Blockley Hospital, and finding his interest in the subject of insanity reawakened, he decided to make it the specialty of his professional life.

In the spring of 1866 he was appointed an assistant in the State Lunatic Asylum at Trenton, N. J., and in the autumn of the same year was chosen superintendent of the Connecticut Hospital for the Insane at Middletown, which position he held to the close of his life.

His death resulted from the effects of an injury which he had received some two months before. In the act of coming down from the second floor of the hospital with a large book in which

¹ See Vol. II, page 560.

he kept the records of the proceedings of the directors of the hospital at the monthly meetings, the heel of one shoe became entangled with the carpet upon the top stair. He made an unavailing effort to grasp the stair rail, but only partially arrested his fall, and rolled to the bottom of the stairs. He was much jarred, but was entirely conscious and able to be removed to his house. His spine, however, was injured, and the membrane of the cord became irritated and inflamed. The inflammation, which began in the lower portion of the cord, extended slowly upwards to the base of the brain, and he suffered at times with pain in that region. This pain on two or three occasions was relieved by a spontaneous hemorrhage at the nose. Towards the last for a week he was unable to retain solid food. He, however, recovered from this condition, and a few days before his death went to the hospital to attend a meeting of the directors, but his condition was such as to excite the alarm of the board. Two days afterwards he retired at night as usual, and was found unconscious in the early morning, and died at about 12 noon.

He had large executive ability, and the institution of which he had charge gives abundant evidence of his thorough appreciation of the needs of the state in providing for the insane, as well as of his skill in carrying forward such plans as were adopted.

He constantly sought to inspire his patients with the belief that he was their friend as well as their physician, and his cheerful face and hopeful words, his constant anticipation of brighter days and better things to come for them, together with the magnetism of his manner and bearing, caused them to become greatly attached to him during their convalescence.

The same qualities of mind inspired the highest regard on the part of those associated with him as assistants and helpers.

He was a skillful physician and a sympathetic and appreciative friend.

DR. GEORGE A. SHURTLEFF.

Dr. George A. Shurtleff, born in 1820, for many years superintendent of the State Insane Asylum of California, at Stockton, died in that city February 11, 1902, at the age of 82 years. He was a graduate of Vermont Medical College at Woodstock, Vt., in 1845, and was formerly professor of mental diseases and

medical jurisprudence in the medical department of the University of California. His work at Stockton was a pioneer work, and he finally failed in health under the severe mental and physical strain incident to his position and was compelled to retire from active service nearly 20 years before his death. He was a man of great force of character and singleness of purpose, which qualities enabled him to overcome many difficulties in providing for the insane in California. He became the superintendent of the institution at Stockton when it was seriously demoralized by incompetency and mismanagement, and by his patient and effective labor improved conditions greatly. He served as superintendent from 1863 to 1884.

DR. T. R. H. SMITH.

Dr. T. R. H. Smith, the physician and superintendent of State Lunatic Asylum No. 1, at Fulton, Mo., died on the 21st of December, 1885, in the 66th year of his age, from nervous prostration, after an illness of 30 days. He was a native of Kentucky. After obtaining his literary and medical education in the colleges of that state he removed to Missouri and commenced the practice of medicine. In 1855 he was elected to the office he held at the close of his life. He continued in the service of the state as physician and superintendent of the State Asylum, except for a short period after the close of the war between the states, for 30 years. He was the oldest superintendent, with one or two exceptions, in the United States. The early history of insane asylums in the United States shows that they were subjected to more complicated difficulties in their administrations than the institutions of the present day. Then greater ignorance and superstition prevailed as to insanity and its treatment, and with the limited provision which legislatures could be induced to make, and the doubting and censorious attitude the public often manifested towards them and their management, superintendents required strong elements of character and unwavering determination of purpose, together with the strongest convictions of duty and a boundless sympathy for the afflicted, to enable them to succeed in the discharge of their duties. Dr. Smith was pre-eminently blessed with superior moral and mental endowments. His high character,

exemplary Christian life, his tender, gentle sympathy for the afflicted, his intellectual acquirements, his professed love for the study of medicine, chiefly for the benefits it confers on suffering humanity, clothed him with a wide and extended influence and gave him great power to harmonize friendly and adverse elements in the interest of the institution. These characteristics added force and efficiency to his superior administrative ability. He was not influenced by love of honor, nor power, nor wealth, but by a dominating sense of duty, the fulfilment of his mission in life. His life work was to give hope to the despairing and hopeless, and to lead wandering intellects out of oblivion and darkness or disorder into light.

DR. MAURICE J. STACK.

Dr. Maurice J. Stack, first assistant physician, Government Hospital for the Insane, died October 17, 1909, after an unusually severe illness of about three weeks. He had been gradually failing in health for some time, though not even his family and nearest friends were aware of the fatal nature of his malady. In fact, it was not known until the severity of his symptoms compelled him to relinquish his work that for some years he had been suffering from malignant disease of the tongue and throat, and that with unequalled fortitude he had endured silently great mental and physical pain rather than cause distress to his family and friends.

When his acute symptoms heralded the end, he calmly and philosophically accepted the inevitable and made no complaints.

He was born in Stamford, Conn., January 8, 1855. He was educated in the parochial school of St. Aloysius Catholic Church, of Washington, D. C., and in Gonzaga College, of Washington; he graduated in medicine in the medical department of the University of Georgetown in 1876, being at the time of his graduation about 21 years of age. In October of the same year he was appointed junior medical assistant by Dr. Chas. H. Nichols, the first superintendent of the hospital. He served continuously under Drs. Nichols, Godding, Richardson and White, and was himself acting superintendent from the death of Dr. Richardson until the occupancy of Dr. White. Under Dr. White he was promoted to the position of first assistant physician, with duties of a broadly

administrative character, which he performed efficiently and satisfactorily until his death, after a service to the hospital of more than 33 years.

DR. HENRY PUTNAM STEARNS.

Dr. Henry Putnam Stearns was born at Sutton, Mass., April 18, 1828, of a family prominent in the annals of Massachusetts.

His early education was in the common schools of his native town. He prepared for college at Monson Academy; matriculated at Yale College in 1849, and was graduated in the noted class of '53. He attended medical lectures at Harvard and Yale universities, and received the degree of M. D. from the latter in 1855.

He went, in the summer of 1855, to the University of Edinburgh to continue his medical studies. While pursuing a post-graduate course he was selected as interne in the Royal Infirmary, where he became acquainted with several men who were afterwards eminent, among them the late Sir John Sibbald. After a further course of study in Paris, he returned, at the end of two years.

He located on his return at Marlboro, Mass., where he continued in practice until 1859, when he moved to Hartford, Conn. Upon April 18, 1861, he was commissioned surgeon of the First Connecticut Volunteer Regiment, and was in the first battle of Bull Run. At the expiration of the three months for which the regiment had enlisted, he received a commission in the U. S. Medical Service; he was forthwith detailed as brigade surgeon under Fremont at St. Louis, but was soon assigned to the staff of Grant, and was with him in the Southwest, except for a short period when serving as medical director of the right wing of the army under McClellan. He was subsequently medical inspector of hospitals on the staff of Colonel R. C. Wood, assistant surgeon general; he superintended the building of the Joe Holt Hospital at Jeffersonville, Ind., and was later appointed medical director of the U. S. general hospitals at Nashville, Tenn., where there were continuously 10,000 patients under his charge.

In September, 1865, he was mustered out, at his own request, with the brevet rank of lieutenant-colonel.

On returning to Hartford in 1865 he resumed general practice, and at the time of the call to the superintendency of the Retreat,

in January, 1874, he probably had the largest practice in the city, his income being largely in excess of the prospective salary as superintendent of the Retreat, but the demands upon his strength had occasioned concern among his friends who urged upon him the wisdom of accepting the call, a step he never regretted.

He was a prolific writer and besides many unpublished papers read before various societies he wrote several brochures and books, among which were: Parts 1 and 2 Med. Vols. and Parts 1, 2 and 3 Surg. Vols. of the "Medical and Surgical History of the War of the Rebellion"; "Classification of the Insane"; "The Relations of Insanity to Modern Civilization"; "The Insane Diathesis"; "Phases of Insanity"; "The Care of Some Classes of the Insane"; "Expert Evidence in the Case of the U. S. *vs.* Guiteau"; "Insanity, Its Causes and Prevention"; "Progress in the Treatment of the Insane"; "General Paresis and Senile Insanity"; "The Classification of Mental Diseases"; "The Importance of Cottages for the Insane"; "Some Notes on the Present State of Psychiatry"; "Lectures on Mental Diseases"; "Commissions in Lunacy."

He was lecturer in psychiatry at Yale University from 1875 to 1897, when he resigned because his health was unequal to the strain necessary to carry on such additional work.

He was a member of the American Medico-Psychological Association and the New England Psychological Association; vice-president and president of the Connecticut Medical Society and of the City Medical Society; a member of the Army and Navy Club of Connecticut; the Military Order of the Loyal Legion of the United States; Robert O. Tyler Post, No. 50, G. A. R., of Hartford; the Society of Colonial Wars; the Connecticut Historical Society; the National Geographic Society; the Sons of the American Revolution, and a director in several financial and insurance institutions of Hartford.

He was in active charge of the Hartford Retreat and had relinquished few of his duties until the fall of 1904 when, as a result of failing health, he found it necessary to withdraw gradually from them and to tender his resignation March 31, 1905. Its acceptance marked the close of 31 years as superintendent of the Retreat and 50 years in the medical profession.

After a comparatively brief and painless illness he passed away May 27, 1905.

He married at Dumfries, Scotland, August 29, 1857, Annie Elizabeth Storrier, who died April 16, 1903.

DR. CHARLES HARRISON STEDMAN.

Dr. Charles Harrison Stedman was born in Lancaster, Mass., June 17, 1805. He entered Yale College, whence he did not graduate, but received subsequently an honorary degree of A. M. He took the degree of M. D. at Harvard in 1828. In 1830 he was appointed resident surgeon of the U. S. Marine Hospital at Chelsea. In 1840 he removed to Boston and entered into practice there. In 1842 he was appointed superintendent of the Boston Lunatic Hospital and physician and surgeon to the numerous correctional, industrial and reformatory institutions of Boston, situated in the same enclosure as the Lunatic Hospital. In 1851 he resumed private practice in Boston. He was the first medical coroner appointed in the state. In 1851 he was elected to the Massachusetts Senate. In 1853 he became one of the Governor's Council. At the opening of the Boston City Hospital in 1864 he was appointed visiting surgeon of the institution, and when he died June 7, 1866, was senior surgeon at that institution.

DR. RICHARD SPRIGG STEUART.

"Richard Sprigg Steuart was of Scotch descent, and both his father and grandfather were physicians. He was born in Baltimore in 1797, was educated at St. Mary's College, served as aide-de-camp in the battle of North Point, 1814, commenced the study of medicine with Dr. William Donaldson, and graduated at the University of Maryland Medical School in 1822; was professor of practice of medicine in the same, 1843; president of the Medical and Chirurgical Faculty of Maryland, 1848-1851; vice-president of American Medical Association, 1849; superintendent of the Maryland Hospital for the Insane, 1828-1862 and 1869-1876, and founder of Spring Grove Hospital. He died July 13, 1876, aged 78. He was an enlightened physician, a public-spirited citizen and a courteous gentleman. He early adopted advanced views in

regard to the insane, to whose relief he devoted his life and means.”¹

It is not known what led him to become interested in the better care of the insane in Maryland, but it is a matter of history that through his insistence in 1828 the state was prevailed upon to enforce its claim for the possession of the old City Hospital which had been erected on ground purchased by the state and later leased by the city to two physicians, who conducted it as a combined city hospital, seaman's hospital and institution for the insane. Although the state was unable to regain its rights in the property until 1834 by reason of the lease, Dr. Steuart had organized a Board of Visitors from the state at large six years before, and as president of this board he made regular visitations to the institution. He found much neglect and many abuses in the management of the hospital. He remained the responsible chief executive officer of the hospital and for a period of more than 40 years guided its work, although not a resident officer until late in his career. He obtained money from the Legislature to enlarge and rebuild the hospital and often became personally responsible for the expenses of the same. He arranged for the removal of the hospital to Catonsville and solicited the sum of \$20,000 which was required, in addition to the state appropriation, to purchase the site. Originally a man of wealth, he gave largely of his means to the hospital and it was not until he became impoverished by the Civil War that he consented to receive any compensation for his services.

The material for a sketch of Dr. Steuart's life is very meager, as he wrote little. He was a man of vigor of character and intellect and possessed an easy dignity which attracted, rather than repelled, approaches. His remarkable suavity and tactful personality were both shown in the success he attained in securing contributions to benevolent objects. No one had the power to refuse him; his gentleness, his enthusiasm, his eloquent speech were irresistible. He was instrumental in bringing Miss Dix to Maryland in 1852, and introduced her to the members of the Legislature at Annapolis, where she spent the whole winter.

¹ Quinan's "Medical Annals of Baltimore, Past and Present." Baltimore, 1885.

Before the war he possessed a large, productive estate on West River, Anne Arundel County, and many servants (slaves), but this did not cause him to give up his life work as a physician. His mind, his heart and his purse were ever at the call of the unfortunate.

Dr. James A. Steuart,¹ his son, bears personal testimony to the influence exerted by his father over the mind of the late Johns Hopkins in choosing the site of The Johns Hopkins Hospital. He says:

After the building of the new hospital at Catonsville, which had been interrupted by the war, had been resumed, it was decreed by the Legislature that the grounds and buildings of the old hospital in Baltimore should be sold to pay for the new. At the annual meeting of the Board of Visitors a discussion arose as to how the property should be sold and at what price. Several propositions had been presented by property agents and others, but nothing had been determined upon. As Dr. Steuart and Johns Hopkins were standing together after dinner on the front steps of the hospital, the former, who had held many conversations with the latter in regard to his declared intention of leaving the greater part of his fortune to found a university and a hospital, said to him: "Hopkins, why will you not buy this property and hold it as a part of your estate which you intend to bequeath for such noble purposes, and found your great hospital here upon this historic ground? The space is ample, the situation all that could be desired for the purpose, and I will use my influence with our Board to sell it to you—in view of the great purpose you have in mind and the great benefit to be derived in the future by the citizens of the state—for \$150,000. And this, as you know, is far below its market value. If you should postpone action in the matter, the board will be obliged to sell and your opportunity will be forever lost; unless," he added, "you care to pay more to others at a later period to recover the property for the site of your hospital." Mr. Hopkins, as was his habit, deliberated for some minutes, and at last said: "Doctor, what you have said has great weight in my mind and I will give you an early answer." Not many days after this conversation Mr. Hopkins purchased the property which is the present site of The Johns Hopkins Hospital.

DR. WILLIAM HUGHES STOKES.

Dr. William Hughes Stokes was born at Havre de Grace, Md., January 18, 1812. His parents, who were representatives of an old Maryland family, removed from Havre de Grace to Baltimore in 1818. Receiving his elementary education in Baltimore, he

¹ Private letter quoted by Dr. John Morris in *The Johns Hopkins Hospital Bulletin*, Vol. VII, page 40.

entered the junior class of Yale College in 1829. In 1831 he graduated with the degree of B. A. and in 1845 he was honored with the degree of M. A. from Yale College.

He read medicine for a year in the office of Drs. Donaldson and Stewart, of Baltimore, and entered the Medical Department of the University of Maryland, and was subsequently an interne at the Baltimore Infirmary. In 1834 he received his degree of M. D. from the university and was soon afterwards appointed resident physician to the Maryland Hospital for the Insane. This position, which he occupied one year, early directed his attention to the care and treatment of the insane.

In the autumn of 1835 he located in Mobile, Ala., where he remained in general practice until 1840, and also held the position of visiting surgeon to the U. S. Marine Hospital in that city. During his residence in Mobile the city was swept by two severe epidemics of yellow fever, one in 1837, the other in 1839.

In the spring of 1841 Dr. Stokes visited Europe and spent a year in the hospitals of Dublin. Here he became the special protégé of the celebrated Wm. Stokes, then one of the leading medical men of the day, and was greatly assisted by his warm friendship. In 1842 he returned to this country and established himself in Baltimore, and in the same year accepted the position of attending physician to the institution for the insane, then known as St. Vincent's Asylum, and subsequently as Mt. Hope Retreat.

In 1845 he was appointed lecturer on obstetrics and diseases of women and children in the University of Maryland, but resigned at the end of the year to become professor of the same branches in the Washington University at Baltimore. This he held until 1850, when he resigned to devote his whole time to the specialty which he had already determined to make his life-work. During the greater portion of his professional career he was a member of the Medico-Chirurgical Faculty of Maryland and the Association of Medical Superintendents of American Institutions for the Insane, now the American Medico-Psychological Association.

He died in May, 1893. He was a type of the old-school gentleman, his manners courtly and his bearing always dignified. He was so reserved as to be almost stilted in his dignity, but beneath this there was a warm heart that always won the admiration of his friends and the love and attachment of his patients. His life-

work was Mt. Hope Retreat, which he followed from its humble beginning with a handful of patients to a position, in numbers and appointments, second to no private asylum in the country. He severed his active connection with the institution in 1887 because of the infirmities of age.

DR. BARTON W. STONE.

Dr. Barton W. Stone died in Louisville, Ky., November 12, 1901. A son of Judge John M. Stone, of Fulton, Mo., and grandson of Rev. Barton W. Stone, of Georgetown, Ky., a co-worker with Alexander Campbell, he was born in Fulton, Mo., in 1844. He graduated at the age of 19 from Westminster College second in his class. He entered the Kentucky School of Medicine at Louisville, from which he graduated in 1867. He first began the practice of medicine in Louisville, but in 1869 was appointed first assistant physician to the Western Kentucky Asylum at Hopkinsville, under Dr. Rodman, and continued in the position for 20 years, when he became superintendent in 1889 upon the retirement of Dr. Rodman.

Dr. Rodman had done excellent work in his asylum during the war, when its buildings were destroyed and its patients were scattered, but these conditions and the economies made imperative by them had rendered his management ultra-conservative, and when Dr. Stone succeeded he found many things needing improvement, and he acted with vigor. An electric light plant was installed; the laundry was remodelled and equipped with improved machinery; water works were put in, connected with all parts of the place; an orchard of 30 acres was planted and the kitchen was rearranged on a modern basis. The use of mechanical restraint was almost abolished. His excellent business sense was shown by the manner in which he made good dormitories out of old attics, in the improvement of the farm, the building of better barns, the increasing of the milk supply, etc., all without increasing the per capita expense.

He was also instrumental in securing improved laws for the insane.

He remained as superintendent until January 30, 1896, when he resigned because of political changes in Kentucky.

He then went abroad to visit the hospitals and asylums of Europe, that he might more thoroughly equip himself for private asylum work. In September, 1896, he took charge, in partnership with Dr. Crockett, of the Morningside Sanitarium at Nashville. He remained there two and a half years, and then removed to Louisville in June, 1899, and established Beechhurst Sanitarium, where he remained until his death, which was caused by rheumatism, complicated by catarrhal pneumonia. He was unmarried.

DR. FRANCIS T. STRIBLING.

Francis T. Stribling was born near Staunton, Va., February 20, 1810, and after receiving a good education, was at first employed in assisting his father, who was clerk of Augusta County. He took one course of medical lectures at the University of Virginia, and another in the University of Pennsylvania, taking his degree from the latter in 1830 and settling to practice in his native town. In 1836, when 26 years of age, he was elected assistant physician to the Western Lunatic Asylum of Virginia, and in 1840 its superintendent. He was one of the prime movers in the organization of the Association of Medical Superintendents of Institutions for the Insane in 1844, and a member during his life. He was an honorary member of the Virginia Medical Society. His entire time was devoted to the management of the asylum and the care of his patients, the number of whom increased during his administration from 72 to more than 350. Possessing professional ability, extensive knowledge of mental disorders, evenness of temper, and inflexible firmness, he was peculiarly fitted for the position. He entered heartily into the early reforms in the treatment of the insane, and was an ardent advocate of modern humane and rational methods of treatment. His success gained an extended reputation, and he was regarded an authority in his native state on all questions connected with insanity.

He took also an active interest in the establishment of a state institution for the deaf, dumb and blind at Staunton. As early as 1845 he began to urge the establishment of a hospital exclusively for the colored insane, and never ceased to bring it to the attention of the Legislature until his object was accomplished.

He died at his home in Staunton on the 23d of July, 1874.

His best known writings were his annual reports, which were models of their kind. He was also author of valuable laws governing hospitals for the insane, which were enacted by the Legislature.

The Western State Hospital owns a portrait of him.

DR. JAMIN STRONG.

Jamin Strong, M. D., of Cleveland, Ohio, died at his home in that city, at 1.30 p. m., January 29, 1895, in his 70th year. His death was sudden and unexpected.

He was born at Parma, Monroe County, N. Y., November 27, 1825. At 12 years of age he removed with his parents to Lorain County, Ohio. In 1846 he began the study of medicine under Dr. Eber Ward Hubbard, after a preliminary training in the public schools, and private instruction in Latin, Greek, and the sciences from his sister. He graduated from the Medical Department of Western Reserve University in the session of 1848-49, and began practice in Elyria, where he continued uninterruptedly until 1869. During that year he was elected a member of the Ohio Legislature, but resigned at the close of the first session.

The following year he removed to Oberlin, Ohio. He spent the succeeding four years in travel and study, and was for a time employed in a department of the U. S. Treasury.

On November 19, 1875, he was appointed medical superintendent of the Northern Asylum for the Insane at Cleveland, Ohio, now the Cleveland State Hospital, and held that position through the kaleidoscopic changes of Ohio politics for 15 years, resigning at last in 1890, a victim of sweeping political changes in the asylums of the state during that year.

He opened an office in Cleveland, Ohio, and in 1891 was appointed health officer of Cleveland. At the end of his term of office of two years, he entered upon the special treatment of nervous and mental diseases and continued in Cleveland until his death.

He was the author of numerous monographs, among which may be noted "Education as a Factor in the Prevention of Insanity"; "The Melancholy Type and its Relations to the Different Crises of Life"; "Psychology the Key to Medical Science"; "Physical

Aids to the Study of the Mind"; "The Emotions and How to Manage Them"; "The Influence of Alcohol on the Nervous System"; "Different Phases of Epilepsy and Hints on their Diagnosis." His annual reports contained discussions of interest and practical importance in the care of the insane, and reflected the strong traits of character and the marked individuality of their author.

DR. SELDEN HAINES TALCOTT.

Dr. Selden Haines Talcott, medical superintendent of the Middletown State Homeopathic Hospital, at Middletown, N. Y., died June 15, 1902, at his residence in the hospital. His death was due to dysentery of a month's duration. Although his health for several months prior to his death was far from robust, he continued to perform his duties, and on May 14 attended a dinner in New York, given in his honor by the homeopathic physicians of the state, to commemorate the 25th anniversary of his superintendency of the hospital, at which he was presented with a loving cup as a token of personal and professional esteem.

He was born in Rome, N. Y., July 7, 1842, and traced his ancestry back to John Talcott, who came from England in 1632. His great-grandfather, Jonathan Talcott, was an ensign in the Revolutionary Army, and after the close of the war settled at Rome, where Dr. Talcott's father was born.

He was educated in the schools of his native city and was graduated from the Rome Academy with prizes in English composition and declamation. In 1862 he entered Hamilton College, where he remained one year and left it to enlist in Co. K, 15th New York Volunteer Engineers. He served faithfully until the close of the war, and received an honorable discharge at Elmira in July, 1865. He re-entered Hamilton College and completed his course in 1869, receiving the degree of A. M. and 12 years later that of Ph. D.

He began the study of medicine in 1869 under Dr. E. A. Munger, of Waterville, and in 1870 entered the New York Homeopathic Medical College, from which he graduated in 1872. He was president of his class and valedictorian.

In 1872 Dr. Talcott began the practice of his profession at Waterville, where he remained until 1875, when he received the appointment of chief of staff of the Homeopathic Charity Hospital

at Ward's Island. He began his life among the insane upon the transfer of 160 patients from the New York City Asylum for the Insane, and in 1877, when the trustees of the Middletown State Hospital sought a medical superintendent, his experience and qualifications decided them to select him. The results of his 25 years' service will ever stand as an enduring monument to his name and their judgment.

In 1873 he married at Waterville, Miss Sarah Munger, daughter of Dr. E. A. Munger, who survives him.

DR. H. A. TOBEY.

Henry Archibald Tobey was born April 6, 1852, in Union County, Ohio. He was educated in the public schools and at Ohio Wesleyan University. He received his medical degree from the Miami Medical College of Cincinnati in 1875. He began the practice of medicine at Sydney, Ohio, where he remained until 1877, when he was appointed an assistant physician at the Columbus State Hospital under Dr. Gundry. He remained at Columbus until 1880, when he was appointed superintendent of the Dayton Insane Hospital. In 1884 he resigned, to enter upon private practice at Lima, Ohio, but was soon made superintendent of the new Toledo Hospital and removed to Toledo, where he remained until 1891, when he became a victim to the Ohio conception of the need of political control of institutions for the insane. He was reappointed superintendent in 1892, and remained until he failed in health, and retired in 1906. He died suddenly at his summer camp in Canada, April 18, 1908.

He was an unusual man, big in body, mind and soul. He had an active, strong mind, and gave much thought and attention to mechanical inventions. He devised an automatic hot water heater, a steam trap and a gas meter, which have been most useful in large public institutions. He had marked organizing ability. He was also interested in the poor and needy, and his charities, although not proclaimed to others, were limited only by his purse.

DR. ELI TODD.

Eli Todd, M. D., extensively known as the superintendent of the Hartford Retreat, was born in New Haven, Conn. on July 22, 1769. His father, Michael Todd, a respectable and wealthy merchant,



DR. SELDEN HAINES TALCOTT.

died when his son was five years of age, leaving him to the care of his mother and an elder half-brother, from whom he received every kindness. He had two younger sisters, one of whom married Samuel Crafts, a Governor of Vermont and a member of the U. S. Senate. At the age of six years he was placed under the care and instruction of his great uncle, Jonathan Todd, D. D., of East Guilford, Conn., from whom, as he said, he received "the milk of his education." He here commenced the study of Latin and other branches preparatory to a collegiate education. At the age of 10 he was placed under the instruction of Elizur Goodrich, D. D., of Durham, Conn., a divine and a teacher of youth, and continued with him until he was fitted for college. He entered Yale College in 1783, at the age of 14.

He graduated in 1787, at the age of 18, with honors, "distinguished for his literary and scientific attainments."

After his graduation he visited the West Indies with the intention of extending his travels to Europe and even to Asia, but had an attack of yellow fever in the Island of Trinidad, and upon recovery was advised to return home.

His father left him a handsome patrimony in the hands of his elder brother, who was lost on a voyage from the West Indies to this country with his ship and the whole cargo. The fortunes of the family being thus swept away, he was thrown upon his own resources. He commenced the study of medicine with Dr. Ebenezer Beardsley as his preceptor, and later began practice in the town of Farmington, Conn., in 1790, before he was fully 21 years of age. He soon acquired a reputation and with it an extensive private practice.

He married on August 9, 1796, Miss Rachel Hill, of Farmington, who died in March, 1825. In November, 1828, he married Catherine Hill, sister of his first wife.

In 1815, after practising his profession in Farmington for about 20 years, he removed to the City of New York, where he remained but a short time, and returned to Farmington.

In 1819 he removed to Hartford, where he soon became the most distinguished physician in the city.

In 1821 the number of cases of insanity in the city and its vicinity attracted attention to the need of a suitable place for their treatment and care. He strove with zeal and intelligence to supply

the need, and Connecticut is indebted to him more than to any other individual worker for the establishment of the Retreat at Hartford.

Dr. Todd was of a nervous temperament, which he inherited from his father, who died insane. His only sister who survived infancy was periodically insane and died by suicide; and he was always apprehensive that he might himself fall a victim to mental disease. These circumstances no doubt had much to do with his exceptional interest in insanity and its treatment.

When the Retreat was ready to receive patients all eyes turned to Dr. Todd as its logical physician and superintendent. But such was his innate delicacy of feeling, and so apprehensive was he that the public would attribute his strenuous efforts in behalf of the Retreat to selfish desire for place and honors, that he resisted long and firmly the solicitations of his friends to accept the appointment. He finally yielded to importunities, and entered upon his duties with a zeal and disinterestedness which foreshadowed the success which he finally attained.

He took the Retreat in its infancy without patients and almost without resources, at a time when public sentiment was far from favorable to such institutions. He carried into successful operation a course of management peculiarly his own, and gave to it an enviable and well-deserved reputation.

He was later solicited to take the charge of the Bloomingdale Asylum, near New York, and subsequently was elected superintendent of the State Lunatic Hospital at Worcester, both of which positions were more lucrative than his office at the Retreat, but he declined them both.

During the last three years of his life he suffered from angina pectoris and towards the end there were pulmonary hemorrhages, if one may so interpret "a copious discharge from the pulmonary cells of a thin and bloody fluid." He visited health resorts without gaining relief and died November 17, 1833, at the age of 64.

A friend, writing after his death, said of him:

He had a chivalrous sense of honor and integrity, softened by the most exquisite feelings of humanity and philanthropy. His professional life was a series of most benevolent acts, and from his eminent talents, as well as from his particular station, he was enabled to mitigate a greater proportion of the corporeal and mental ills of humanity than falls to the

lot of most men. A peculiar suavity of manner and an unaffected sympathy in the distresses of others justly inspired greater confidence of his patients in him than in any other physician we ever knew. For many years he has been very generally considered at the head of his profession in the state.

DR. HARRY ASHTON TOMLINSON.¹

Dr. Tomlinson was born in Pennsylvania, July 3, 1855. His parents, George Washington Tomlinson and Sarah (McCahon), were natives of the same state. His father belonged to an old Quaker family, and his mother was of Scotch-Irish parentage. At the opening of the war his father went to the front as a lieutenant in the 26th Pennsylvania, and when mustered out in 1863 re-enlisted in the 99th Pennsylvania, rising to the rank of major. He participated in all of the engagements of the Army of the Potomac, and at Deep Bottom, Va., near the close of the war, was wounded, sustaining injuries which eventually caused his death. His son, Harry Ashton Tomlinson, attended school at intervals during his youth, but from the age of 16 was dependent entirely upon his own resources. While in a general store at Bath, N. Y., for six years, he occupied his leisure in the study of the rudimentary principles of medicine. He thus won a scholarship offered by the University of Pennsylvania, and in 1877 matriculated at that institution. He graduated in medicine in 1880, and engaged in practice at Muncie, Pa., for eight years. In June, 1889, he was appointed assistant physician of the Friends' Hospital at Frankford, Pa., and remained three years.

In 1891 he became assistant superintendent of the St. Peter State Hospital, and in June, 1893, following the resignation of Dr. C. K. Bartlett, he was made superintendent. During his 12 years at St. Peter State Hospital he inaugurated new methods in the treatment of the insane, and the hospital became one of the first rank through his efforts. He recognized and practised hospital methods and discarded the old asylum ideas. He introduced women nurses into the men's wards and equipped the building with modern appliances, and through his work became a recognized authority in psychiatry.

In 1912 a state hospital for inebriates at Willmar, Minn., was established, and he divided his time between the two cities, super-

¹ By William A. Jones, M. D., St. Paul, Minn.

intending his own hospital and watching the construction of the new institution, of which he later became superintendent.

He was a student, keeping up with the progress of medicine, particularly that which related to the care and treatment of the insane. He wrote much on topics connected with his special work, but did not hesitate to discuss general medical problems as he saw them among those who were under his care. Although his views on pathology were looked upon by some of his associates as unique, they were fundamentally sound.

He was an ardent debater and speaker and a genial and wholesome companion, and had many friends in Minnesota.

He was a member of the American Medical Association, the American Medico-Psychological Association, the American Congress of Physicians and Surgeons, the American Neurological Association, the New York Medical Legal Society, the Philadelphia Neurological Society, the Minnesota Academy of Medicine, the Minnesota State Medical Association, the Minnesota Valley Medical Association, and the National and State Conference of Charities and Corrections.

He married in April, 1884, Miss Mary Vandever, of New Castle, Del.

On the 24th of February, 1913, he had a cerebral hemorrhage which produced complete left-sided hemiplegia, and died at his home in Willmar on May 30, 1913.

Those who knew Dr. Tomlinson and those who were closely associated with him appreciated him both as a man and as a progressive physician. He stimulated others to work and think, and his record as a psychiatrist will be a lasting monument to his memory.

DR. JOHN EUGENE TYLER.

Dr. John Eugene Tyler was born in Boston December 9, 1819; was graduated from Dartmouth College in 1842; studied medicine with Dr. Dunn at Newport, R. I.; received the degree of M. D. from the University of Pennsylvania and also from Dartmouth in 1846; and entered upon the practice of medicine at Salmon Falls, N. H., the same year. He was a member of the New Hampshire Legislature for seven years, and in 1852 was chosen superintendent of the Asylum for the Insane at Concord, N. H. After five years

at Concord he was elected to succeed Dr. Booth at McLean Asylum, entering upon his duties in 1858. After his retirement in 1871 he resided in Boston as a consulting physician in mental diseases. He was for many years professor of mental diseases at Harvard Medical School. He died in Boston of pneumonia March 9, 1878.

Dr. Isaac Ray said of Dr. Tyler:

Without any profound study of psychological science, he possessed that nice discernment of abnormal conditions which springs from a happy faculty of observation. His success was much promoted by a genial temper and a pleasing address, that always made him a welcome companion, bringing at every visit a gleam of sunshine to many darkened souls. Few could withstand the cheering influence of his hearty laugh and pleasant words.

DR. CHARLES E. VAN ANDEN.

Dr. Charles E. Van Anden was born in Auburn, N. Y., January 9, 1819, and, with a few brief absences, spent his whole life there. He entered Union College in 1835, and graduated in 1839. After leaving college he spent some time as a private tutor in New York, and later became a student of theology with the late Dr. Croswell, of Auburn. For reasons quite satisfactory to himself, he gave up the study of theology and began that of medicine in the office of Dr. Lansing Briggs, of Auburn, and received the degree of Doctor of Medicine from Buffalo University in 1850, having previously attended two courses of lectures at Geneva Medical College.

He opened an office in Auburn and began to practice his profession.

In 1852 he was called to take charge of a cholera hospital at Buffalo, at a time when cholera was making great havoc in that city. He came to the conclusion that it was the call of duty, and unhesitatingly entered upon his work, and by his calm and dignified Christian deportment, and the wise exercise of his skill as a physician, won the esteem and approbation of all.

In 1857 he became physician to the Auburn State Prison, and in 1859 was appointed assistant to Dr. Edward Hall, then superintendent of the Asylum for Insane Convicts, and on Dr. Hall's retirement in 1862 succeeded him to that responsible position. This position he held until 1870. After his retirement he devoted himself to the practice of his profession in Auburn. Modest,

sensitive, and distrustful of his own abilities, he lacked the aggressive qualities so requisite to success, but performed all work placed in his hands with the greatest intelligence and fidelity.

He was dignified in manners, but courteous, his affability and kindness winning the hearts of those with whom he was most intimate. In general knowledge, in sound judgment and in the graces of refinement and scholarly cultivation, Dr. Van Anden excelled. Of the greatest purity of character in private life, he maintained a spotless reputation as a public officer. He died a poor, but an honest, man.

At the time of his death Dr. Van Anden was a member of the New York State Medical Society and of the Medical Society of Cayuga County.

His death occurred October 19, 1873, eight days after a peculiar and distressing accident. He drew into the œsophagus a rubber plate of triangular form, about an inch in diameter, to which was attached a single tooth. After making several unsuccessful attempts to remove it, he called upon an able surgeon who also failed to detect its location and to remove it. Violent inflammation supervened, with swelling, and inability to swallow. He was visited by an eminent surgeon from an adjoining city on the fourth day, when the inflammation and swelling had become so great an exploration of the œsophagus was impracticable. Upon the eighth day a profuse hemorrhage took place, from which he sank and died.

An autopsy revealed the plate concealed just within the œsophagus, a sharp angle of which had made an incision about one-half an inch in length through its posterior wall. Near the base of the right lung was a gangrenous mass, involving the tissue of the lung itself, and which was the seat of the hemorrhage. In attempting to swallow, liquid aliment was forced through the aperture in the œsophagus, which infiltrated itself through the cellular tissue, and gravitating to the point mentioned, had excited inflammation, that resulted in gangrene and death.

DR. EDWIN HOLMES VAN DEUSEN.

Dr. Van Deusen was born in Livingston, N. Y., August 29, 1828, and graduated from Williams College in his 20th year. He received his medical education at the College of Physicians and

Surgeons of New York, and on his graduation in 1851 was given an appointment as house physician in the New York Hospital. At the close of his term of service he was appointed an assistant physician in the Utica Asylum. He remained at Utica until 1858, when he resigned and removed to Michigan to accept the superintendency of the Michigan Asylum at Kalamazoo, which had been under construction since 1854, but was not opened until 1859. Here he remained for 20 years, and resigned in 1878 because of impaired health. He not only placed his institution on a high plane of efficiency, but also gave an impetus to the care of the insane throughout Michigan which it has never lost. He was a facile writer, and, although he published no books, the influence of his correspondence throughout the state was large and his biennial reports were much valued by the medical profession. One of the best known of his writings was a paper on neurasthenia, written as an appendix to a report, in 1869, before Beard had written on the subject.

His succeeding years, when not employed in public service on two commissions, one to locate and erect the institution at Pontiac and the other to locate a similar institution at Traverse City, or as a member of the Michigan Board of Corrections and Charities for several years, were spent quietly in his own home in equally efficient labors for the public good. He presented a public library to Kalamazoo and a convenient parish building to St. Luke's Church.

He died after a long illness July 6, 1909.

DR. CLEMENT A. WALKER.

Dr. Clement A. Walker was born in Fryeburg, Me., July 3, 1820. His boyhood was passed near the White Mountains of New Hampshire. He received his preparatory education at the Fryeburg Academy, and graduated at Dartmouth College in 1842. During his college career his health gave way and he travelled in the South, teaching school for a time in Virginia. He had suffered from hemorrhage from the lungs, which led his friends to fear a fatal result, but he afterwards acquired an apparently vigorous physique, which was severely tested by his 30 years of active hospital life.

He graduated in medicine at Harvard University in 1850, and began practice in South Boston under Dr. Charles H. Stedman, who was then physician to all the city institutions located there, including the Boston Lunatic Hospital. In 1847-49, when cholera and ship-fever were prevalent among the emigrants at the quarantine station at Deer Island, he volunteered his assistance, and entered on the work of managing these unfamiliar and dreaded diseases with characteristic promptness, courage and skill.

On July 1, 1851, he was appointed superintendent of the Boston Lunatic Hospital, which position he held until his resignation on account of ill health, January 1, 1881, a period of nearly 30 years. This hospital, built in 1839, had been in charge of Dr. Butler, and Dr. Stedman, whom Dr. Walker succeeded, for a period of 12 years. In its rear was a semi-detached building known as the "Cottage," fitted up with cells like those of a police station for the violent insane. Such cells were supposed to be a necessary adjunct to a hospital for the insane in those days. Dr. Walker, however, immediately advised their disuse, and in a short time succeeded in having them abandoned by gradually placing their occupants in the wards of the main building, and thus became one of the pioneers in the discontinuance of cells in the treatment of the insane.

In appearance Dr. Walker was a little above medium height, becoming stout in middle life. His eyes were dark and piercing; his mouth expressive of firmness. His hair, jet black in youth, turned white at 35, and with his snowy beard gave him the appearance of a vigorous old age in early manhood.

He early recognized the necessity of better accommodations for the city's insane, and for years labored earnestly with this object in view, until success nearly crowned his efforts. A site for the new hospital was purchased, plans made and adopted, and an appropriation passed, only to be vetoed by the mayor, who opposed the project. This veto was a severe blow to his hopes, and he had only the satisfaction of seeing the city's plan of construction adopted at Danvers, and of having medical supervision of the work in behalf of the commission who had it in charge.

He was an active member of the Medico-Psychological Association from 1851 until a short time before his death, and was

president for three years. He was also a member of numerous medical societies. During the Civil War he was appointed inspector of hospitals and made a tour of service in the West. In 1872 he made a brief visit to Europe. Through the influence of the German consul he was presented with the decoration of an order of nobility for his humane treatment of an insane German citizen in Boston.

DR. D. R. WALLACE.

Dr. David R. Wallace died November 21, 1911, at his home in Waco, Tex., surrounded by his wife and descendants to the fourth generation.

He was born in Pitt County, N. C., in 1825. He spent his early boyhood on his father's farm, and went to school when opportunity permitted. Later he entered Wake Forest College near Raleigh, N. C., and graduated with honors. In 1853 he began the study of medicine, and graduated at the University of New York, and afterwards served in a hospital in New York. His ability attracted the attention of the late Dr. John W. Draper, who offered Dr. Wallace a teaching position, which he declined on account of his health. In 1854 he removed to Texas, where he resided until his death. His life of 57 years in Texas covers a long and eventful period in the affairs of his adopted state, during which he took a keen interest and an active part, not only in progressive medicine, but also in national and state politics. He was active in educational and literary fields, and was professor of Greek, Latin and French in Baylor University, and continued the practice of medicine at the same time until 1862, when, without solicitation, he received from the Surgeon-General of the Confederate States an appointment as surgeon, and served until the close of the war, when he returned home penniless and resumed the practice of medicine in Waco. In 1874 he was appointed superintendent of the State Lunatic Asylum at Austin, Tex., and served until 1879, when he returned to Waco. In 1883 he was appointed superintendent of the North Texas Insane Asylum at Terrell, which position he filled until 1891, when he again returned to his home in Waco. During his long and efficient service in the two asylums of Texas he modernized and simplified the treatment, nursing and care of the insane along scientific and

practical lines. He was one of the organizers of the Texas State Medical Association, and once its president. He was for many years an active member of the American Medico-Psychological Association, and for several years was an honorary member.

DR. JOSEPH T. WEBB.

Dr. Joseph T. Webb was born in Chillicothe, Ohio, in 1827. Here he received his preliminary education. He entered the Ohio Wesleyan University at Delaware, Ohio, and graduated with honors in the year 1848. Soon afterward he began the study of medicine in the office of his father, a physician of Chillicothe, and later matriculated at Transylvania Medical College, Lexington, Ky., where he graduated in 1852. He opened an office and continued the practice of medicine in Cincinnati until 1858, when he engaged in the manufacture of varnish, and was in this business upon the opening of the war in 1861, when he entered the volunteer service of the U. S. Army as surgeon of the 23d Ohio Volunteer Infantry, in which capacity he served until 1865. Not long after he married Miss Anna Matthews, and traveled throughout Europe until 1871, when he was elected superintendent of Longview Asylum for the Insane. He resigned this office in 1874 on account of ill health, and traveled again over Europe and America, with the hope that change of air and location might be found of benefit to him. He died at Minneapolis, Minn., April 27, 1880, at the age of 53. He possessed great executive ability and was generous, sympathetic, impulsive, kind and obliging, a true friend and a true gentleman. He was brother-in-law of ex-President Hayes and also of Stanley Matthews, Associate Judge of the Supreme Court of the United States.

DR. JAMES N. WHITAKER.

Dr. J. N. Whitaker was born in Baldwin County, Ga., October 11, 1845, and died at Milledgeville, Ga., August 12, 1911, age 66 years. After attending the county schools he entered Oglethorpe University in Midway, Ga., and soon after, at the age of 19, entered the Confederate Army. Just before the close of the war he was wounded in the head by a shell while engaged in an artillery battle at Savannah, Ga.

He was taken prisoner by the Union Army, and held until the close of the war. After returning home he read medicine, and entered the University of Georgia Medical School at Augusta, from which he graduated in the year 1869. He located near Milledgeville, in Baldwin County, and entered upon a country practice.

After several years he was elected a physician to the Georgia State Sanitarium, where he served as assistant physician, and later as assistant superintendent until his last illness, giving more than 30 years of service to this institution. He was a valuable man in institutional work because he had the good of the patient at heart. All loved him and knew that they had a friend in him. He was highly appreciated by the superintendent for his loyalty and fidelity to the institution.

He was a man of energy and indomitable courage. He never forsook a friend, and knew not what it was to be selfish, always preferring others to himself and always ready to respond to the calls of charity.

He was a member of the Methodist Church, of the Baldwin County Medical Society, of the Georgia State Medical Association, and of the American Medico-Psychological Association.

DR. SAMUEL WHITE.

Dr. Samuel White was born in Connecticut on February 23, 1777. He commenced his professional career at Hudson, N. Y., in 1797.

Owing to the occurrence of insanity in his own family, he was led to pay much attention to mental disorders, and in 1830 he established a private institution at Hudson, which he successfully conducted. In 1840 he was elected president of the New York Medical Society, and delivered an address on insanity which presented one of the best synopses of our knowledge of insanity, especially of its treatment, which has ever been published. His health began to fail shortly after the meeting of the Association, and he died at Hudson, February 10, 1845.

He was tall and slender, his countenance grave and dignified. With iron gray hair and a sober, calm and thoughtful expression, he gave the impression of a man of earnest character, and of thoughtful, studious habits. Within a limited sphere he discharged

the various duties of a long and active professional life with ability and in a truly Christian spirit.

DR. HERVEY BACKUS WILBUR.

This philanthropist and educator of defectives was born in Wendell, Mass., August 18, 1820; his father was a Congregational minister, a lecturer on natural history, and the author of a popular work on astronomy.

The son graduated from Amherst College in 1838, and from the Berkshire Medical College at Pittsfield, Mass., in 1842, and later practised medicine at Lowell and Barre. He first married Elizabeth Holden, and after her death Emily Petheram, of Skaneateles, N. Y.

He became interested in Dr. Edward Seguin's success in teaching idiots at Bicêtre, and eagerly read his books on the subject. Later when his preceptor at Lowell had left his practice temporarily in his charge, he visited the County Home, where he found a man who was an idiot and who only possessed a good memory for dates. The belief that from this one faculty the man's mind could have been educated to a certain degree, took possession of him, and in 1848, at Barre, Mass., in his own house, he opened the first school for idiots in this country. A physician, Dr. Frederick F. Backus, of Rochester, N. Y., then a member of the New York Senate, became interested in Dr. Wilbur's work in Massachusetts and succeeded in having the state open an experimental school at Albany in 1851. Dr. Wilbur was called to the charge of it, and in 1854 it was made a permanent charity of the state under his care and removed to Syracuse.

He died suddenly on May 1, 1883, of rupture of the heart.

A tablet in the wall of the main building of the New York State Institution for the Feeble-minded says:

The first in America to attempt the education of the feeble-minded, and the first superintendent of this asylum. By his wisdom, zeal, and humanity he secured its permanent establishment.

DR. JAMES WARREN WILKIE.

Dr. James Warren Wilkie, superintendent of the Asylum for Insane Criminals, at Auburn, died on the 13th of March, of organic disease of the heart. He was born at Manlius, Onondaga

County, N. Y., July 7, 1825, and died in 1874. He studied medicine with Drs. Moore and Taylor, of that village, and attended lectures at the Albany Medical College, from which he was graduated in 1847. He began the practice of medicine at Sandy Hill, Washington County, and in 1852 removed to Auburn, where he continued his professional labors. In 1870 he was appointed superintendent of the asylum, and continued in that position until his death. He was a member of the State Medical Society, and had been the president of the Cayuga County Medical Society. In 1872 he received the honorary degree of A. M. from Middlebury College. This is the record of his honors, but it gives us little knowledge of the man. He was as generous of heart as he was large of stature, and endeared himself to his patients and friends in a peculiar manner. There was a combination of qualities in him which drew forth the love and respect of all with whom he came in contact. His medical brethren bear testimony to his kindness, manliness, and uniform courtesy. The Christian religion was the foundation of his symmetrical life and character. He was governed by its precepts, and made it the guide of his daily life. As a public officer, he discharged his duties with scrupulous fidelity. His economy in expenditure of the funds entrusted to him, and his exactness in accounting for their faithful use were marked traits of his official life.

DR. E. T. WILKINS.

Dr. Edmund Taylor Wilkins, who died of influenza February 10, 1891, was born in Montgomery County, Tenn., October 20, 1824, and was the son of Dr. Benjamin and Jane Taylor Wilkins.

He received his collegiate education at William and Mary College, founded in 1692 at Williamsburg, the early capital of Virginia, and graduated in 1844. After leaving college he was engaged for several years in raising cotton in Mississippi and Louisiana, and afterwards conducted a sugar plantation in the latter state.

Upon the discovery of gold in California he took passage, in March, 1849, on the schooner *St. Mary* from New York for the Pacific Coast, by way of Cape Horn.

After a tedious voyage, filled with irritating delays and great peril, extending over a period of nearly a year, the small craft cast anchor in the Bay of San Francisco.

His first effort at mining was an attempt to turn the Trinity River from its course by a dam, constructed of sand-bags. This proved unsuccessful, and after he had spent the summer and all his available means in a fruitless effort to compel the river to "give up its hidden treasure," he abandoned the mines and the occupation of mining forever.

In 1853 he returned to Tennessee and attended one course of medical lectures at the Memphis Medical College, after which he sold his sugar plantation in Louisiana and, returning to California in 1854, purchased land in Yuba County, near Marysville, and turned his attention to farming.

Finding farming unprofitable, he took a second course in the Memphis Medical College, where he graduated in 1861. On returning to California he left his farm and made his residence in Marysville, then the most flourishing inland town of the state, and devoted himself to the study and practise of medicine, giving special attention to the subject of insanity.

When the Legislature of 1870 authorized the Governor to appoint a commissioner to compile all accessible information as to the construction and management of asylums and the modes of treating the insane, he was chosen for that important mission, and entered at once upon it. He visited 50 of the principal institutions in the United States and Canada, and crossing the Atlantic spent the greater part of two years in travel, during which he inspected about 100 asylums in Great Britain and on the Continent of Europe. The results of this mission are embodied in his report made to the Executive Department upon his return to California, which was published and distributed to the various public institutions and to many individuals throughout the United States, because it contained many valuable charts and plans and specifications of the best asylum buildings then in existence or in course of construction, and also much important information gathered through interviews with distinguished alienists in Europe and America as to current methods of treating and managing the insane.

In view of the experiences and observations thus obtained Dr. Wilkins was selected one of the commission to find a site and to prepare plans for the additional asylum provided by the Legislature of 1872, and in the following year, with his confreres, located the Napa State Asylum for the Insane.

He was elected resident physician of the Napa Asylum in March, 1876, and had he lived a few days longer would have completed his 15th year as its superintendent.

FREDERICK HOWARD WINES.

Frederick Howard Wines, LL. D., was born in the City of Philadelphia, April 9, 1838. His father, the Rev. Dr. E. C. Wines, was a teacher and college professor, an author and a philanthropist of international reputation. His early life was spent partly in New York, New Jersey and New England. He was graduated from Washington College (now Washington and Jefferson), Pennsylvania, in 1857, with the highest honors of his class. In the autumn of 1858 he entered Princeton Theological Seminary as a student of divinity. His studies were twice interrupted; first by an affection of the eyes and afterward by the Civil War. Having been ordered by an oculist to take a year's rest, he spent the summer of 1869 in Southwest Missouri, in the service of the American Sunday School Union, with headquarters at Springfield, and during the following winter was acting as stated supply of a mission church there, when the outbreak of the Civil War occurred in the spring of 1861. His parents were then residents of St. Louis, whither he returned in time to be an eye-witness of the stirring scenes described in "The Crisis."

It was his desire to enter the army, in which more than one position was offered to him, but his parents refused their consent until a year later, when he was commissioned by President Lincoln as a hospital chaplain and assigned to duty at Springfield, Mo., where he served for more than two years without transfer, and participated in the "Marmaduke fight," January 8, 1863, the official report of which mentions him as having acted with conspicuous bravery on the field.

He resigned this chaplaincy to complete his course at Princeton, where he was graduated in 1865. He was then called to the

pastorate of the First Presbyterian Church of Springfield, Ill., in which he preached his trial sermon on the Sunday preceding the funeral of President Lincoln, whose pew was draped in black on that memorable occasion. He remained there for four years with entire satisfaction to the congregation and to the community; but in 1869 the General Assembly of Illinois created a new commission to take general supervision of the state charitable institutions, entitled "The State Board of Public Charities." In casting around for a secretary, the commission, unsought, selected young Mr. Wines, who was then regarded as the best fitted man for the place on account of his heredity, his experience and his known interest in public affairs. He held this secretaryship for nearly 30 years, during all changes of state administration, with the single exception of four years, during which an opposing political party, under the leadership of Governor Altgeld, held the reins of power. The admitted excellence of the Illinois system of public charities is partly due to the wise and disinterested counsel and personal influence of Dr. Wines. He was the principal author of the statute passed for its government in 1875, which did not require amendment in any important particular during the many years it was in operation. During the entire period of his official career the breath of scandal never touched him or any of the institutions under his charge. The Illinois Board of Public Charities was one of the pioneer commissions of its class, and Mr. Wines had the difficult task of defining the policy of the state toward the unfortunate and criminal elements of its population, not for his own state alone, but for the entire country, which he did in a series of official reports which attracted wide attention and had an unusual number of interested readers. He was also one of the principal movers in the organization of the National Conference of Charities and Correction. He organized its first independent meeting in Chicago in 1879, and presided over its deliberations at Louisville in 1883. Its published proceedings contain many original contributions from his ready pen.

He was sent as an official delegate from the State of Illinois to the Second International Penitentiary Congress at Stockholm in 1878. For three years, 1887 to 1890, he served as secretary of the National Prison Association. He was elected an honorary mem-

ber of the Prison Association of France, and was invited by the Russian Government to deliver one of the principal addresses at the International Penitentiary Congress at St. Petersburg, but was unable to attend. Later he was the author of a popular work on the prison question, entitled "Punishment and Reformation," which is in use as a text-book in various institutions of learning in this country.

He was also deeply interested in the care and treatment of the insane, and it is to his courage as an innovator that the creation of the Kankakee State Hospital is due, the first establishment of its kind erected and organized on the "detached ward plan," which has since been adopted by many states and by the federal government in its great hospital at the national capital.

He was the author of the amended lunacy law of the State of Illinois, and did much to clear up the more or less mysterious disputes between the legal and medical professions as to their respective relations in the commitment of the insane to curative and custodial institutions, thus rendering a material service to the science of medical jurisprudence.

His expert familiarity with benevolent and reformatory work in all the varied fields of philanthropic effort led to his selection as expert special agent of the Tenth U. S. Census for the collection and collation of statistics relating to the "defective, dependent and delinquent classes" of the population, and again in 1900 to "crime, pauperism and benevolence." His skill and success in dealing with these tasks were the occasion of his appointment by President McKinley as assistant director of the Twelfth Census and his subsequent removal from Illinois to Washington, D. C. In the organization of that census he took a prominent part, and many of its novel features were his suggestions. In connection with the World's Fair at Chicago in 1893 a series of international congresses was held, one of which was an International Congress of Charities and Correction, of which Ex-President Rutherford B. Hayes was president and he was first vice-president; but, owing to the death of President Hayes, the organization of this congress devolved on Dr. Wines, who presided over it.

During the administration of Governor Altgeld, while out of office Dr. Wines was invited to deliver various courses of lectures; one before the students of Princeton Theological Seminary on

"The Church of the World, or Thoughts on Christian Sociology"; one at The Johns Hopkins University, repeated at Harvard and at the University of Indiana, on "Social Classes and Social Evils," and one at the State University of Wisconsin on "History and Philosophy of Prison Reform," afterwards delivered in revised form before the Lowell Institute of Boston.

He also spent nearly a year in a special investigation of the practical operation of the liquor legislation of Missouri, Iowa, Indiana and Ohio, for the committee of 50, of which he was a member; the results of this inquiry were embodied in a volume entitled "The Liquor Problem in its Legislative Aspects," of which, jointly with Mr. John Koren, Dr. Wines was author.

When the Republican party returned to power in Illinois in 1896 Dr. Wines was at once called back to fill his old position as secretary of the Board of Charities. Here he served about two years, when he was honored by appointments in the Census Department, which took him from Springfield. He lived in Washington and later in North Carolina until late in 1909, when the new charity act of Illinois was about to become effective. Those interested in the success of the new plan suggested that Dr. Wines be invited to a responsible position in the organization. He accepted the position of statistician and at once started the publication of the *Institute Quarterly*. This journal commanded favor throughout the country.

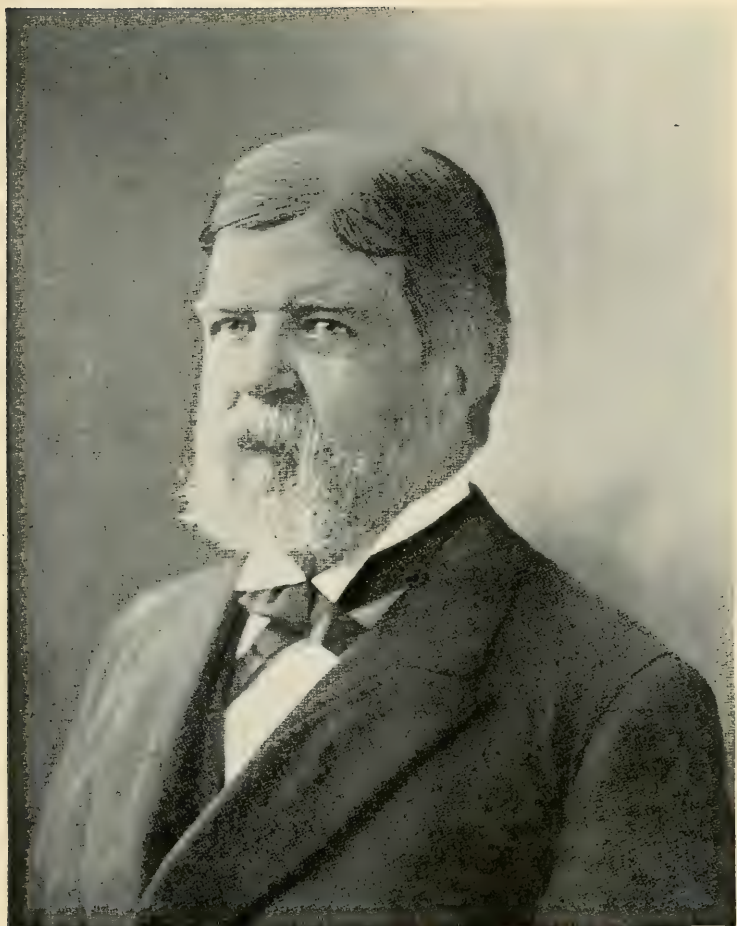
In 1887 he established *The International Record of Charities and Correction*, which survived for nearly three years before it was discontinued for want of adequate support. He afterwards edited for one year *The Charities Review*, printed in New York.

This notice of his public career would be incomplete without a reference to his services during the administration of Governor Fifer, in adjusting the differences between the coal miners of Northern Illinois and their employers, and to his official reports on the floods in the Ohio and Mississippi rivers.

He died suddenly at his home in Springfield, Ill., January 31, 1912.

DR. FREDERIC C. WINSLOW.

Frederic C. Winslow, M. D., a graduate of the Northwestern University Medical School, 1874, died suddenly in Chicago, October 10, 1901. After his graduation he practiced in Jacksonville,



FREDERICK HOWARD WINES.

Ill., and was for 18 years assistant superintendent of the Central Hospital for the Insane at that place. After leaving that position he conducted a private sanitarium until appointed by Governor Tanner superintendent of the State Hospital. Governor Yates later appointed him superintendent of the Hospital for the Incurable Insane, Bartonville, near Peoria. He was a member of the American Medico-Psychological Association and of the American Medical Association.

DR. PETER M. WISE.

Peter M. Wise was born at Clarence, N. Y., March 7, 1851. His early education was obtained in the district school and at Packer Classical Institute, but his design to prepare for college was frustrated by the death of his father. In 1869 he began the study of medicine with Dr. O. L. Parker, of Clarence, and later attended medical courses at the Albany Medical College and the University of Buffalo, graduating from the latter institution in 1872. He served nine months in the St. Louis City Hospital and later as city physician during an epidemic of smallpox. Afterwards he practised medicine in a suburb of Buffalo for a short time, but was appointed in October, 1873, an assistant physician at the Willard Asylum. In 1883 he was appointed first assistant physician and a year later, upon the resignation and removal to Philadelphia of Dr. Chapin, he was made superintendent. In 1886 he was appointed upon a commission to locate a new hospital for the insane in Northern New York, and after the location had been selected at Ogdensburg he was selected to prepare plans for the hospital. In 1890 he was made medical superintendent of the Ogdensburg State Hospital upon its completion, and held the position until 1896, when he was made president of the State Commission in Lunacy by Governor Morton, to succeed Dr. Carlos F. MacDonald.

In 1900 he was removed summarily from office by Governor Roosevelt because of alleged improprieties in selling stock of a mining company of which he was president to assistant medical officers in the various hospitals and in permitting a private corporation to erect an ice-making plant on the grounds of the Manhattan State Hospital. He vigorously denied the charges, but was

unjustly deprived of the opportunity to be heard in his own defence. The blow was a severe one from which he never recovered. He engaged in several private enterprises thereafter in New York, but was not prosperous. He died September 22, 1907.

He was a member of the Seneca County Medical Society and its president; also of the Medical Society of New York, and of the American Medico-Psychological Association, and its president in 1899-1900. He wrote easily and clearly and was the author of many papers published in *The American Journal of Insanity*, *The Alienist and Neurologist*, and other medical journals. He also published a "Text-book for Training Schools for Nurses" in two volumes. He was an excellent administrator and made many improvements in the methods of practical psychiatry.

DR. ABRAM HARMAN WITMER.

Dr. Abram Harman Witmer was of Quaker descent, and born in Lancaster County, Pa., April 10, 1845. He was the son of Abram Witmer and Susan Newcomer Witmer, the youngest of five children. He began his education in a local academy and subsequently pursued his studies in an academy at Wilmington, Del. He entered upon the study of medicine in 1863 at Mt. Joy, Pa., under Dr. Benjamin H. Musser. In the same year he attended his first course of lectures at Jefferson Medical College. He graduated in medicine at Jefferson in March, 1866, before the age of 21 years, and for a year remained at the college as a private quiz master, and as demonstrator of anatomy, a position which he occupied for several years. He afterwards became demonstrator of anatomy in the medical department of the University of Pennsylvania. In 1870 he was appointed resident physician of the department for the insane in the Philadelphia Almshouse, where, as an assistant to Dr. D. D. Richardson, he remained a number of years.

In September, 1876, he was appointed third assistant physician at the Government Hospital in Washington. Until his death, January 18, 1900, he remained an officer of this institution, growing in the confidence and respect of his associates, and of the public at large. During the administration of Dr. Godding he became first assistant physician.

February 14, 1891, Dr. Witmer was elected professor of mental diseases in Georgetown College, and held the chair until his death.

He was a member of the Medical Society of the District of Columbia; of the American Medical Association; of the American Medico-Psychological Association, and of the National Geographic Society.

On the death of Dr. Godding, the Board of Visitors turned to Dr. Witmer as one best fitted to assume the administration of the hospital, and to carry forward the work which had so suddenly dropped from the hands of his chief. Upon the recommendation of the board he was appointed acting superintendent, and discharged the duties of the position efficiently for a period of six months, until Dr. A. B. Richardson was appointed superintendent. Dr. Witmer, by reason of his long experience and thorough knowledge of the needs of the hospital, rendered a valuable service, most creditable to himself and acceptable and satisfactory to all.

The physical strain of this arduous service proved too great for his strength, and soon after he relinquished the duties of acting superintendent his final illness commenced. He slowly failed in bodily strength and died January 18, 1900.

DR. H. WALTON WOOD.

Dr. H. Walton Wood died at Jefferson Hospital, Philadelphia, Pa., January 12, 1915, after an illness of two years. He was born at Spring Garden, Va., in 1879. At an early age he removed with his parents to Baltimore, where he remained until 1902. He received his early education in the public schools of Baltimore and at the Polytechnic Institute and later at Deichmann's School, where he prepared for the university. He was graduated from the University of Maryland School of Medicine in 1902, and later received an appointment at the Worcester State Hospital, Massachusetts, where he remained for a year. He was assistant physician at the Taunton State Hospital, Massachusetts, from 1903 to 1904, when he entered private practice at Fairhaven, Mass. He was successful in private practice and remained at Fairhaven until 1911. His early experience in the Worcester State Hospital had developed an interest in nervous and mental diseases, and in 1911 he went abroad to prepare himself more thoroughly to follow this branch of medicine.

When he returned from abroad he became associated with Dr. Stedman of Bournewood, Brookline, Mass., and later settled in Boston, where he practised exclusively in nervous and mental diseases. After a year in Boston, he settled in New Bedford, Mass., in general practice, but devoted much time to nervous and mental cases and medico-legal work.

He was affable and genial and possessed a pleasing personality. He was an untiring worker and his final illness may be ascribed to his excessive zeal for his patients. During 1913 he developed a tubercular lesion of the throat, and though advised to give up work he continued his practice for six months longer. He was finally compelled to retire and the last months of his life were spent at Saranac Lake and at Browns Mills in the Pines, N. J.

DR. SAMUEL BAYARD WOODWARD.

Samuel Bayard Woodward, the son of a physician and a native of Connecticut, was born June 10, 1787, and licensed to practice medicine at the age of 21. His attention was called to the study of mental diseases by the occurrence of several cases of insanity in his own practice and in that of his professional brethren whose adviser he was. The difficulty of managing these cases in private practice led Dr. Woodward and his particular friend, Dr. Eli Todd, to take the first step towards the establishment of the Hartford Retreat, and he took credit to himself for having secured its present delightful location. He was appointed superintendent of the State Lunatic Hospital at Worcester, Mass., in September, 1832, and in December following moved into the hospital as soon as rooms could be finished and furnished for his family. He retired on June 30, 1846, on account of failing health, and settled in Northampton, Mass., where he died suddenly on the evening of January 3, 1850.

His personal appearance was commanding and his carriage majestic. His hair was almost white. He had a bright, animated expression of countenance, and large, handsome features, and made a strong impression by his earnest manner. His stature was six feet two and a half inches, and his weight was about 260 pounds. He was erect, and though full in figure, his motions were quick and graceful. Although affable, civil and accessible to all,

he seemed born to command. Dignity and ever-enduring cheerfulness sat upon his countenance and betokened the serenity and happy state of his mind. Of an ardent, enthusiastic temperament, he exerted by his conversation and writings a wonderful influence on the community in which he lived, and employed his full powers for many years for the benefit of the insane.

DR. WILLIAM LEONARD WORCESTER.

William Leonard Worcester, M.D., assistant physician and pathologist at the Danvers Insane Hospital, Mass., died June 9, 1901.

He was born in 1845 at Chelsea, Vt. His paternal grandfather was a clergyman, the Rev. Leonard Worcester, of Peacham. His father was a physician, who, soon after the birth of his son, removed to Thetford.

He was the eldest of a family of nine children. He acquired his early education in the public schools and at Thetford Academy. He entered Dartmouth College and graduated in 1869, ranking second in his class. He went next to Washington, D. C., where he had received an appointment as clerk of the Senate Committee on Pensions. While filling this position he engaged in the study of medicine at Columbia Medical College and obtained his degree in 1873. He received an appointment in the Pension Bureau, and soon became first assistant medical examiner. In 1875 he went abroad for the further study of medicine.

Returning in 1876, he engaged for two years in general practice in Burlington, Vt. Relinquishing this he became assistant physician at the Michigan Asylum at Kalamazoo, and remained for 11 years. He was then appointed first assistant physician and pathologist to the State Asylum at Little Rock, Ark., where he remained for six years.

While an assistant in these hospitals he began the study of pathology, especially the pathology of insanity; and his thorough equipment in this branch of medicine secured for him the appointment of assistant physician and pathologist to the Danvers Insane Hospital in 1895, which position he ably filled until the time of his death.

Four years before he infected a finger of his left hand with tuberculosis while engaged in laboratory work. Insidiously the

disease increased. He consulted the most eminent men in the country. He was advised to have the hand amputated at once. After mature deliberation he decided that he preferred to live a few years with both hands than more years with but a single one. This disease had been slowly but surely advancing in the left hand during three years, but he was never heard to utter a word of complaint at his seeming fate.

Ten days before his death, while apparently in good health, he infected a finger of the right hand, undoubtedly while engaged in his researches in the laboratory. On the following day serious symptoms manifested themselves and his disease rapidly progressed to a fatal termination. Until within a few moments of his death Dr. Worcester followed his own case apparently with nearly the same watchfulness as his consultants. He looked upon approaching death with perfect calmness. He gave directions for the disposal of his valuable library, and arranged other matters.

As a psychiatrist he ranked with the best known of our country. As a pathologist, he was an expert. As a writer upon psychiatry, he was an authority.

Personally, Dr. Worcester did not win by the first impression which he produced upon strangers. He was not easily approachable, but association with him revealed a warmth and responsiveness in his nature which showed him to be a true nobleman in integrity of life and character.

He never married. He led a life of unselfishness and devotion to his special field, and his death, in the estimation of all who knew him and his life work, left a great void in psychiatry.

DR. JOSHUA HUSBAND WORTHINGTON.

Joshua Husband Worthington, of Frankford, Philadelphia, Pa., was born in Darlington, Harford County, Md., August 8, 1817. His father was a prominent physician and member of the Society of Friends. He received his medical education at the Jefferson Medical College, whence he graduated in 1838. He remained in his native county for four years in practice with his father, and afterwards removed to Frankford. In 1842 he was made resident physician of Friends' Asylum near Frankford, and in 1850 was appointed superintendent of the same institution. He was a mem-

ber of the Association of Medical Superintendents of American Institutions for the Insane, and a permanent member of the American Medical Association. He was also at one time a member of the Northern Medical Association of Philadelphia; of the State Medical Society of Pennsylvania; and of the Philadelphia County Medical Society, of which he was vice-president in 1859. He published various articles in *The American Journal of Insanity*, also in *The American Journal of Medical Sciences* of Philadelphia. In connection with Dr. Charles Evans, from 1843 to 1850 he published eight of the reports of the asylum; since that time until his retirement he was the sole author of these publications. In 1860 he married Mary M. Kimber, of Philadelphia, and, after her death, Sarah, daughter of Stacy B. Collins, Esq., of New York City. He resigned in 1877 and made his home first in Baltimore and later in Germantown, Pa. He died December 27, 1885, in his 69th year.

DR. CHARLES E. WRIGHT.

Dr. Charles E. Wright, late superintendent of the Central Indiana Hospital for Insane, at Indianapolis, died at the hospital February 22, 1893, from an intestinal hemorrhage. For some years he had suffered from cardiac trouble, and a few months before his last illness had a similar attack, brought on by violent muscular effort in endeavoring to restrain a patient whom he discovered, on entering a ward, to be making a furious attack upon an attendant. Until within ten days, however, previous to his death he endeavored to faithfully perform the arduous duties involved in the superintendency of an institution containing a population of nearly 2000 people.

He was born November 1, 1843, in Indianapolis. While a mere youth he volunteered as a private soldier in the Civil War and served with credit. Upon his return he became a student of Asbury (now DePau) University at Greencastle. At the conclusion of the sophomore year, he left the institution and matriculated in the Ohio Medical College, where he graduated in 1868. Returning to Indianapolis, he began the practice of his profession, making a specialty of diseases of the eye, ear and nose, soon attaining a lucrative practice and professional distinction. He was for some time editor of the *Indiana Medical Journal*. Later, feel-

ing the effect of persistent confinement incidental to special work, he engaged in general practice also, and was a successful, popular, efficient practitioner in medicine and surgery. At the same time he entered the field of teaching and filled various chairs in the Medical College of Indiana during the remainder of his life. He was the oldest member of the faculty and one of the most popular. In addition he filled professorships in the medical department of Butler University. He was a member of the Indiana State Medical Society and of the Marion County Medical Society; was frequently a delegate to the American Medical Association. His contributions to current medical literature were frequent and valuable, being admirable from a literary as well as a medical view-point. For four years he was physician of the State School for the Blind; for eight years Surgeon General of the State Militia; for two years president of the Indianapolis Board of Health. He also was a member of the staff of St. John's Home for Invalids, and as chief of staff of St. Vincent's Hospital. Not content with these engrossing occupations, being a lover of agriculture and stock breeding, he purchased a valuable stock farm, and for some years until the time of his death, was president of the Indiana Horse Breeders' Association.

DR. RUFUS WYMAN.

Rufus Wyman, father of two famous sons, both physicians, was born in Woburn, Mass., July 16, 1778; was graduated from Harvard College in 1799, and studied medicine under Dr. John Jeffries of Boston. He practised medicine in Chelmsford, Mass., and from 1818 to 1835 was superintendent of McLean Asylum, resigning on account of ill health. He died in Roxbury, June 22, 1842.

He was president of the Massachusetts Medical Society, and was a man universally beloved and respected. Dr. Luther V. Bell, one of the most renowned of his successors at McLean Asylum, says of him:

Entering on his duties with no similar undertaking to guide him in interior arrangements or general management, the weight of difficulty and responsibility which necessarily fell upon him must have been far greater than any of his successors in such trusts, who have had the aids of his ingenuity and labor, can experience. Indeed, to this day (1843) scarce any

institution can be visited in the land where evidence of the operations of his mind do not present themselves on every hand, not only in details of architectural and mechanical arrangements, but in the moral regimen and internal system. What is due to his memory as a public benefactor in this way can never be realized or appreciated except by a small number whose opportunities and duties enabled them to judge of the difficulties he encountered and the means he projected to meet them.

Dr. Bell also says of him :

There was a moral beauty in his character, a sterling integrity in him as a director of a public institution, which may well serve as a model to all who may be called upon to discharge such sacred functions.

PART VI
BIOGRAPHIES IN CANADA AND
NEWFOUNDLAND

CHARLES ALEXANDER.

Charles Alexander was born in Dundee, Scotland, June 13, 1816, and died in Montreal, November 4, 1905. Educated at the Dundee Parochial Grammar School, he was later apprenticed to Keiller & Sons, the well-known marmalade manufacturers, with whom he secured the groundwork of his knowledge of the confectionery business which he later established so successfully in Montreal. In 1840 he and his young wife decided to settle in Canada; they took passage on the ill-fated "Atlantic" which ran aground at Torbay, near St. Johns, Newfoundland, and was wrecked. They escaped with their lives, but lost everything else. After various vicissitudes the young couple settled in Montreal, and in 1842 he established himself in business in that city.

He always took the greatest interest in measures for the relief of human suffering, and during his lengthy and useful life gave to them freely of his time and energies. The list of the charities in which he took an active part was long, the principal ones being the Montreal General Hospital, one of whose governors he was from 1860 to 1900; the Mackay Institute for Deaf Mutes and Blind, of which he was president for many years; the Protestant House of Industry and Refuge, of which he was successively president from 1877 to 1900, and honorary president until his death.

He was also one of the leading organizers of the Protestant Hospital for Insane, and a member of its board of management from the time of its inception, being one of the original board of governors. He was honorary vice-president at the time of his demise, having refused the presidency.

The following tribute to his memory from the pen of an old friend well describes him:

As was justly stated by one of the leading dailies, "Montreal's best citizen died when Charles Alexander, at the age of a score of years beyond man's allotted span, passed away." His life history was bound up with the progress of humanitarian work in the city of Montreal. Everything that had for its object the prevention

and amelioration of suffering and everything that made for purity in public affairs had his sympathy and support. A broad-minded Christian, his life was practically devoted to the good of his fellow men, and he knew no restrictions of race or creed in his unselfish endeavors for the betterment of mankind. Few are more worthy to rank with such well-known philanthropists as Howard, Wilberforce, Peabody, Tuke and Pinel.

DR. J. J. ANDERSON.

Dr. Anderson was born in the township of South Gower, Grenville Co., Ont., in 1861. His primary education was gained in the school of his native place, while his professional studies were pursued in the medical department of Queen's University, Kingston. He began practice with his uncle, Dr. W. J. Anderson, at Smiths Falls, Ont., and later removed to Winchester Springs. In 1890 he settled in Manitoba. He lived in Wawanesa, Man., for six or seven years, then moved to Brandon and practiced in that city until September 1, 1903, when he was appointed medical superintendent of Brandon Asylum, which position he held until October 31, 1909, at which date he resigned to resume private practice. His death occurred in the autumn of 1912.

DR. JOHN ARDAGH.

Dr. Ardagh was born at Waterford, Ireland, in 1810. He took his degree of M. D. at Edinburgh University, and his M. R. C. S. in England in 1831. He then engaged in practice in his native place, and was for eight years physician to the House of Industry and the Insane Asylum there. In 1842 he made a visit to Canada, where his cousin, the Rev. S. B. Ardagh (first rector of Barrie, Ont.), had come to settle. The following year he came again to Canada and settled at Orillia, Ont., where he continued to practice until his death, August 6, 1872. He experienced all the hardships incident to the practice of medicine in the early days of the colony. He was no stranger to long, lonely horseback rides through a thinly settled country, with roads at times almost impassable, and in all sorts of weather. He was highly esteemed as a skilful physician, and was much beloved, especially by the poor, to whom in their sickness he never failed to pay the utmost attention, giving

his professional services gratuitously, however far he might have to travel and however inclement the weather might be. In this way he became known in the country as the "poor man's doctor." For some years he was medical attendant to the Indians stationed on the reserve at Rama; and when the branch lunatic asylum was established at Orillia in August, 1861, he was appointed medical superintendent. He conducted the affairs of the institution with great judgment and unremitting attention up to the closure of the establishment in November, 1870, owing to the transfer of the patients to a new asylum then opened at London, Ont.

HUGH BELL.

Prominent in connection with the inception and construction of the Nova Scotia Hospital for the Insane was the Hon. Hugh Bell, whose interest in the subject was first aroused when he acted in the capacity of commissioner of the Poors' Asylum in Halifax. Mr. Bell was born in the county of Fermanagh, Ireland, January 12, 1780. When he was less than two years of age his parents came to Halifax, and very soon afterwards his father died. His mother was left practically without means, but she was a woman of sterling qualities, and her ambition to give her boy a good education was made comparatively easy of realization by her son's studious and thoughtful disposition. At the age of 21 he began teaching school, but a few years later became bookkeeper for a brewing firm, to which he was subsequently admitted as a partner, and of which, in course of time, he became the sole member. The success of his business fluctuated greatly, and at one time he was considerably embarrassed, but he refused any offer at compromise, and eventually was able to meet all his obligations and to establish the business on a basis which yielded him a comfortable income. Until he reached the age of 55, his interests, apart from his business, were almost wholly of a religious nature. He was a consistent Methodist, and was in great demand as a local preacher. He also devoted some time to literary work, numerous contributions to the press being accredited to his pen, while for a period he was the virtual, though not the nominal, editor of one of the Halifax journals. In 1835 he was elected by acclamation to fill a vacancy in the provincial assembly, and in the following year was returned, at a general election, by a substantial majority.

In politics he was a Liberal, and was one of Mr. Howe's strongest supporters in the battle for popular government which waged so vigorously at that time. In 1844 he was elected mayor of the city of Halifax, and in 1848 was appointed to the Executive Council of the province, holding office for a short time as financial secretary and then for a period of some years as chairman of the Board of Works. Mr. Bell was closely associated with Miss Dix in her agitation for the creation of a hospital, and on its completion, in 1867, one of the three new wards then erected was named in his honor the Bell Ward. His death occurred at Halifax in 1860.

The following excerpt from the private journal of his son, the late John A. Bell, indicates very accurately the part played by Mr. Bell in the history of the Nova Scotia Hospital:

In this latter capacity (Chairman of the Board of Works) he had almost sole control and superintendence of the building and equipment of the Lunatic Hospital at Mount Hope, Dartmouth. Into this work he threw his whole soul and energies for ten years or more. It is not too much to say that an asylum for lunatics would have been delayed for many years, and certainly would not have been carried out on so noble a scale, had it not been for the persistent zeal and untiring activity of Hugh Bell. On this subject he was a thorough enthusiast. Though comparatively a poor man, he appropriated the whole of his one year's salary as mayor, and I verily believe had he been able he would have completed the whole establishment at his own expense. During these years Miss D. Dix, a widely known philanthropist of the United States, paid several visits at Bloomfield (Mr. Bell's residence), and I believe it was my mother, with the approval of Miss Dix, who chose the name "Mount Hope."

DR. GEORGE FOWLER BODINGTON.

Dr. Bodington, eldest son of Mr. Geo. Bodington, surgeon, of Sutton Coldfield, Warwickshire, England (who was one of the pioneers of the out-door treatment of tuberculosis), was born at Erdington, Warwickshire, September 14, 1828. He was educated at Sutton Coldfield Grammar School and apprenticed to his father. He received his early medical training at Queen's College, Birmingham, and after taking the membership of the Royal College of Surgeons (1849) he visited India and South Africa as ship's surgeon of the "Hebrides." He spent some time practicing his profession in the back settlements of Pietermaritzburg, where his fees were paid him in elephants' tusks, of which he brought away



HUGH BELL.

some hundreds of pounds worth as the fruit of about eight months' work. At that time the elephant still roamed the forests of Natal, and life there suited Bodington's hardy frame and adventurous disposition. He, however, returned to England in 1851 and settled in practice at Kenilworth, in partnership with his uncle, Wm. Bodington, F. R. C. S. In 1866 he moved to Middlesbrough-on-Tees, Yorkshire, where he remained until called to take the management of a private asylum established by his father at Sutton Coldfield near Birmingham. Brought into contact with the vivid medical life of that great city, Dr. Bodington became an active member of its various medical societies, and bore a leading part in establishing the Birmingham Medical Institute, of which he was one of the early presidents. He was also president of the Birmingham and Midland Counties Branch of the British Medical Association in 1876. He was at this time full of activity, taking an immense interest in all that made for professional, social and political progress, and in particular associated himself with Mr. Dalrymple in the movement to obtain legislation for the care and control of inebriates. The asylum with which he became connected, owing to the falling in of the lease, had to be transferred to Ashwood House, Kingswinford in Staffordshire. Here, unfortunately, his wife never enjoyed good health, and after several years of trial Dr. Bodington decided to sell the asylum and seek elsewhere, in a more congenial climate, a home for his family. After wandering for a year or two, he settled eventually in British Columbia, where he purchased a farm and carried on medical practice. The advance of civilization in these western regions rendered a large lunatic asylum a necessity, and after many vicissitudes one had been established. Of this Dr. Bodington was appointed medical superintendent on February 1, 1895, resigning his position February 28, 1901. His success in this work is well attested both by his yearly reports and by the tribute paid to him in the first report made by his successor, Dr. Manchester. In view of the faithful services rendered, he was voted a liberal retiring allowance by the government. Returning to England, Dr. Bodington eventually settled in Paris, where his eldest son occupied an important position in Anglo-American legal and commercial circles. Here he passed away on May 8, 1902, in the 73d year of his age. Dr. Bodington was a man of magnificent physique

and fine presence, a delightful companion and an enthusiastic man of letters. He was the worthy holder of the F. R. C. S., Eng., and the M. R. C. P., London, in addition to various other degrees.

EDWARD L. BOND.

Edward L. Bond, youngest son of Right Reverend Bishop Bond, of Montreal, was born in that city, October 2, 1850, and died in Phillipsburg, Que., December 4, 1901. Mr. Bond had always been interested in the work of the Protestant Hospital for Insane, and had served as a member of the Board of Management from 1896 until his appointment as honorary secretary in 1900, which position he held when his untimely death occurred. As is the case with any institution in part dependent on the charity of the public for its revenue, the personnel of its governing body is a matter of considerable moment; fortunate was the charity which numbered Mr. Bond on its administrative board. Physically of exceedingly fine appearance, known far and wide as a man of the highest integrity, and prominent in business ability, the friends he made for the various humanitarian projects in which he was actively interested were legion.

Although a busy man, being engaged as underwriter for a number of important insurance companies and a member of the directorate of several large commercial concerns, he found time to do more than his share for the uplift of his fellow men. He was chairman of the Provincial Plebiscite Committee; one of the originators of the Law and Order League, of the Good Government Association and of the Citizen's League; he was a member of the executive committee of the Society for the Prevention of Cruelty to Animals. He also had been lieutenant in the militia, serving through the Fenian Raids of 1866 and 1870, and acting as second in command of his regiment through the Riel Rebellion in 1885; he retired with the rank of major.

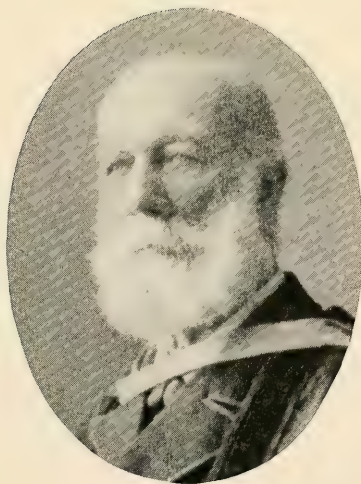
Truly of him it might be said, "Write me as one who loves his fellow man."

THE RIGHT REVEREND WILLIAM BENNETT BOND.

William Bennett Bond was born in Truro, England, September 10, 1815, and died at Montreal, Can., October 9, 1906. The son of an English army officer, John Bond, an upright and austere man,



DR. J. A. SIVEWRIGHT.



DR. G. F. RODINGTON.

and Nanny Bennett Bond, who was a pious and devoted mother, he was as a lad surrounded by the influences which moulded a character fit to choose the better part throughout life. His education was secured at the Calday Grammar School, West Kirby, Cheshire, and proceeded with nothing more unusual than the customary digressions and escapades accompanying the acquirement of elementary knowledge by the healthy lad. Tales of these early years perhaps show his outstanding traits to have been strength and endurance physically, prodigious activity both at work and play, and the championing of the weak against the strong—appropriate qualities indeed for one who was later to become the first prelate of his church in Canada, the country of his adoption.

At the age of 17, the youth, his school days over, came to Canada to seek his fortune, this being doubtless decided upon, as William was the eldest of 12 children and a British army officer's pay, nearly a hundred years ago, was too slender to meet the insistent demands upon it that must have occurred with such a quiverful. Arriving at Newfoundland he there began a commercial career, but meeting with two gentlemen, a Mr. Willoughby and a Mr. Bridge, both scholarly men, who evidently were extraordinarily attracted to the young man by his sterling character, the idea of his entering holy orders seems to have first suggested itself to him; with the former of his new friends he continued his studies, including Greek, with this end in view, while by the latter he was introduced to Bishop Mountain, of Quebec, as one fitted to pursue a clerical calling. After two years' study under the Reverend Bishop he passed the necessary examinations, and in 1840 was ordained a priest of the Anglican church.

In the following year, 1841, he went to St. Johns, Newfoundland, and there married Eliza Langley, returning immediately to take up the work of travelling missionary through that part of Quebec Province known as the Eastern Townships, a fertile rolling section of country then largely settled by colonists of British birth. There during the ensuing two years the young cleric faithfully performed his duty, and well it was that his body was strong and his purpose unswerving. The mere physical stresses of travel at that time were such as to break down a man of lesser frame: on one occasion he travelled over 400 miles in 24 days, conducting nearly 40 services, part of this distance being covered on foot,

part on horseback, and part with a light conveyance, over roads and trails which existed in scarce more than name.

In 1843 he was given his first pastorate at Lachine and five years later was appointed assistant minister to St. George's Church, Montreal. From this time, his rise in the church was rapid, he being successively advanced to the post of rector of St. George's in 1860; created archdeacon in 1870; dean in 1872; bishop in 1879; metropolitan archbishop in 1901; and Primate of all Canada in 1904.

His career as a clergyman, his eloquence in the pulpit and his life outside of it, his able discharge of the many important administrative duties connected with the higher commands of the church to which he rose, stamped him as a man of unusual ability and integrity, while the unanimity of his choice for the successive promotions which came to him amply proved his fitness for them all.

Naturally a power in the city of Montreal, he ever allied himself with the various schemes for social reform, the amelioration of human distress in whatever form it occurred, and the furtherance of good in the body politic.

During the formative years of the Protestant Hospital for Insane, he warmly threw the weight of his position and personality to further the plan, and presided over one of the earliest meetings called to appoint a committee to consider the question of the care of the Protestant insane in Quebec, and to give formal notice of application for an act of incorporation. He was one of the first members of the provisional Board of Governors and was unanimously named the first president of the corporation, being elected in June, 1885, and retiring in November, 1886, owing to the press of diocesan duties. He remained a member of the Board of Management until 1905.

JONATHAN BROWN.

Jonathan Brown was one of the many prominent men of Montreal who took an active interest in the Protestant Hospital for Insane for a number of years, both as a member of the Board of Management and Honorary Secretary, which latter position he ably filled from 1903 until his death on July 17, 1915. Born in Windsor, Que., in 1828, he was educated at the academies of Hatley and Sherbrooke. He entered the lumber industry in Montreal in

1856, and in a few years became first a partner, and later vice-president of the Shearer & Brown Co., Ltd. Always philanthropic in his motives, he ever was in the forefront of charitable movements. As his declining years came on and active business cares were laid aside, he devoted more and more of his time to the furtherance of various humanitarian projects in Montreal. With him faith and works went hand in hand, and his purse was ever open to the call of the needy—more than one institution receiving substantial aid from him when in financial straits. He was a life governor of the Montreal General Hospital, a life member of the Mechanics Institute, and one of the directors of the Montreal Horticultural Society.

DR. H. E. BUCHAN.

Dr. Humphrey Ewing Buchan, assistant superintendent of the London Hospital for the Insane, died October 17, 1907. He was born near Paris, Ont., May 20, 1842. He graduated in arts and medicine in the University of Toronto, and afterwards studied in London, England, and in Glasgow.

After spending many years in private practice, in 1883 he was appointed assistant superintendent at the Toronto Hospital for the Insane. He subsequently occupied a similar position in Rockwood Hospital for the Insane at Kingston, and then removed to the London Hospital for the Insane, Ontario, in which institution he remained until his final illness overtook him.

Dr. Buchan was a popular physician and had many admirers in the service. Had he commenced the study of psychiatry at an earlier period in his professional career he would no doubt at the proper time have been found at the head of an institution. He was a man of gentle nature, and enjoyed the confidence and respect of all with whom he came in contact.

DR. RICHARD MAURICE BUCKE.

On the 19th of February, 1902, Richard Maurice Bucke, M. D., died under extremely sad circumstances. About 11 o'clock on the previous evening, while apparently in the best of health, he went upon the veranda of his residence, as was his custom, for a short walk before retiring. His family heard him fall, and going

to his assistance, found him unconscious. He never rallied, and died in a few hours.

He was born March 18, 1837, at Methwald, Suffolk, England. In 1838 his family emigrated to Canada and settled on a farm in London Township, County of Middlesex. Here he remained until he was 16 years of age.

He went to the United States, and in his desire to see the world accepted any chance that came, working on farms and on steamboats, even as a deck hand, so long as he gained a new experience. He first drifted South, by way of the Mississippi River. In the spring of 1856 he crossed the Western plains with a cattle train, acting in the capacity of cook to the party. At Salt Lake City he joined a small party setting out for California—a hazardous undertaking for that time, particularly as the company had determined to walk the entire distance, although carrying their supplies in wagons. The inevitable happened, and in a desperate fight with Indians three of the little band were killed, the wagons and supplies were captured, and the survivors were forced to attempt the remaining 300 miles without resources of any kind. A pitiful story it was, and of the fifteen who set out only four reached their destination, and these were almost starved when the journey was over. So great was their need of food at times that they were forced to feed on seeds and small frogs. When they reached the Humboldt River they were almost dead from thirst.

He next appeared in California, and during the winter of 1859-60 he was again the victim of tragic circumstances, he being the sole survivor of a mining party. He was badly frozen while in the mountains, and had it not been for his wonderful vitality and indomitable will he would never have reached a settlement or survived the long and terrible illness that followed his exposure. As the injuries received on this memorable trip across the mountains made walking difficult he returned to Canada, via the Isthmus of Panama, in 1860, and commenced the study of medicine, graduating with high honors in McGill University, Montreal, in the spring of 1864, and winning a prize. After his graduation he spent 18 or 20 months in the London and Paris hospitals, and on his return went to California for eight months as a witness in a mine suit.

He settled in Sarnia, Ont., where he practiced for ten years, when he was appointed medical superintendent of the Hamilton Asylum for the Insane, and after a year's service was transferred to the London Asylum, where he remained until his death, just 25 years later.

On his return from California he married Miss M. Gurd, who survives him.

Dr. Bucke was president of the American Medico-Psychological Association in 1898, and was regarded as one of the foremost men in medical circles in Canada.

As an alienist he was eminent, and his name is associated with the names of such reformers as Joseph Workman and others. He accepted non-restraint as something better than a fad, and in his institution the non-restraint system was first adopted (1882), this lead being promptly followed by Kingston and Toronto. It marked the beginning of an era of better things for the insane of Ontario, and Dr. Bucke's energy was a stimulus to many of the juniors in the service. His views on the abuses of alcohol in the treatment of insanity, and his investigations in gynecological surgery among the insane are well known. He believed that a large proportion of insane women suffered from uterine and ovarian diseases which could be benefited by operation. The improved physical health resulting implied a better state of mentality. That this was good common sense all agree, the point at issue being the ability, or want of ability, on the part of the majority of specialists to decide which cases should be operated on.

He was loved by his patients and employees and had a deep sympathy for the old and infirm; his warm heart won him life-long friends wherever he went. His library was one of the most extensive in Canada, and he was an untiring student, reading widely and deeply, particularly along the lines suggested by his remarkable books on "Man's Moral Nature" and "Cosmic Consciousness."

In person he was of striking appearance, of splendid physique and carrying the stamp of intellectual force in his face. He dressed much after the style of Walt Whitman, and would be marked in any assemblage as a man of originality. In daily life he was simple, direct and honest and was a great lover of nature. The happiest days of each year were those spent at his summer

retreat at Gloucester Pool, in Muskoka. He was deeply mourned by a large circle of friends, who loved him for his sturdy honesty, his warm heart, his intellectual force, but most of all for his noble qualities as a man.

GEORGE BULL BURLAND.

George Bull Burland was born at Loggan Hall, Wexford Co., Ireland, in 1829, and died at Los Angeles, Cal., May 22, 1907, whither a quest for health had led him. He was educated by a private tutor, and came to Canada with his parents in 1840, for some years occupying a position in the office of his uncle, George P. Bull, then proprietor of the *Gazette* in Hamilton, Ont. Returning to Montreal, where his parents had settled, he associated himself with the engraving business and later became president of the British American Bank Note Company, an enterprise which he created. This company for many years executed the greater portion of the banknote printing and engraving for the Dominion Government. He also established the Burland Lithographic Company in 1874, of which he was president and manager till 1886, when other more absorbing duties caused him to resign from this position.

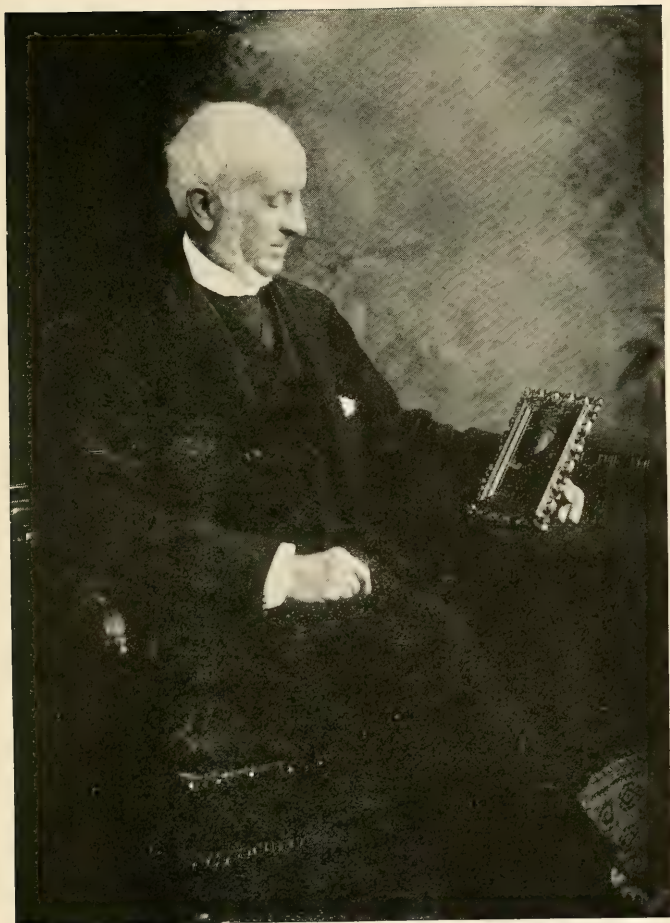
Although engaged in large and important commercial ventures, which would prove sufficient to engross the undivided attention of the average man, he devoted great interest and valuable time to charitable works. He was a life governor of the Montreal General Hospital, of the Western Hospital and of the Montreal Dispensary, and was connected with many other beneficent institutions, the object of which was the relief of suffering. He was vice-president of the Protestant Hospital for Insane, being elected to that office by the first Board of Management in 1886, and in November being appointed president, owing to the resignation of Archbishop Bond; he retained the chair of this body until 1888, when, owing to a disagreement between himself and some of the other governors, he tendered his resignation. Men who "do" things, it might be recorded, seldom turn the second cheek to the smiter, and in this respect the subject of this sketch was no exception, meekness not being his outstanding virtue. His retirement from office however in no wise lessened his real sympathy with the

hospital's aims, and during his lifetime his benefactions included a splendidly equipped pathological laboratory and a fine residence for the medical superintendent, while at his death a substantial legacy to the institution showed his approval of its achievements. It was ever his regret that the institution had had perforce to mortgage various buildings to the Provincial Government to secure the funds to erect them, and he would fain have seen the finances of the hospital on a much better footing. A man of strength in the community, shrewd in business, and, under a brusque exterior, of generous heart, his strong support of charitable aims in Montreal was sadly missed at his death.

DR. DANIEL CLARK.

Dr. Clark was born at Granton, Inverness-shire, Scotland, August 29, 1835. Accompanying his parents to Canada in 1841, his early years were spent upon his father's farm. In 1850 he went to California where he had some stirring experiences during the year or more he remained there. On his return to Canada he attended the Simcoe Grammar School, and subsequently studied classics, mathematics and philosophy in Toronto. His medical studies were pursued at the Toronto School of Medicine and at Victoria University, Cobourg, where he graduated in 1858. Later the University of Toronto bestowed on him the degree of M. D., *ad eund.* After leaving college, he went to Europe and studied in Edinburgh, London and Paris. Returning to Canada in 1859, he began practice in Princeton, Ont., but when the Civil War broke out in America joined the Federal Army of the Potomac, under General Grant, as a volunteer surgeon, gaining much valuable experience. In 1872 he was elected a member of the Ontario Medical Council for four years, and afterwards was re-elected for a second term. He was twice elected president of the College of Physicians and Surgeons, Ontario, and at one time was vice-president of the Medico-Legal Society of New York. In 1891 he became president of the American Medico-Psychological Association, and in 1906 was made an honorary member of that body. He was also immensely popular with the Scottish societies of Toronto, occupying many positions of honor with them. In December, 1875, he was appointed medical superintendent of the Toronto

Asylum for the Insane in succession to Dr. Charles Gowan, who had filled this position for a short time after the retirement of Dr. Joseph Workman. The appointment caused a good deal of feeling at the time among certain members of the medical profession, who felt that politics were being made to play too important a part in institutional affairs. On the other hand, the Medical Council strongly urged Dr. Clark's claims, and the government, which had been severely heckled because it had imported a psychiatrist from England, the experiment turning out badly, was glad to accept the suggestions of the Council. Dr. Clark, commencing the work of governing a large institution at middle age without previous experience, did admirably and proved a sound and efficient administrator. He was fair-minded and popular with his officers, interested in his patients, and had the happy knack of knowing how to deal with the troublesome public that always tries the patience of the asylum superintendent. Having a fondness for metaphysics and the Scotchman's penchant for philosophical discussion, he was not inclined to look with favor upon localized pathological conditions as playing any important part in the causation of the different psychoses, and various papers by him, such as the "Animated Molecule," made clear his mental characteristics and bent on this subject. Dr. Clark's point of view never coincided with that of the psychiatrist of the present day, and he belonged to a school pretty largely his own. He was particularly opposed to the theory of brain localization, and was able to keep up his end of the argument with great credit to his powers as a debater. It was unfortunate that he should have commenced his psychiatric studies when well up in middle life, because he had qualities which would have made him brilliant had he been trained in this specialty in his youth. As it was he did excellent work, and was frequently called as an expert witness in medico-legal cases. In these he gained a well-earned reputation, being self-possessed, keen-witted and fully aware of the fact that the average lawyer, no matter how well crammed, is easily put on the rocks by one who has a technical command of the situation. The doctor was of commanding presence, and was in every respect an ideal witness, never appearing as a partisan, although he delighted in leading a cross-examiner into metaphysics and psychological definitions. On such occasions he appeared at his best. Dr. Clark was a de-



DR. JAMES R. DEWOLF.

lightful companion, possessed of a pawky humor that made him acceptable in any company, while his literary style made his writings welcome additions to the library. Besides frequent contributions to periodical literature, both medical and general, he was the author of a work, "Pen Photographs" (1873); of a novel called "Josiah Garth," dealing with the Canadian Rebellion of 1837 (1878); of the "Public and the Doctors in Relation to the Dipsomaniac" (1888); and of "Mental Diseases," a synopsis of 12 lectures delivered at the Hospital for Insane, Toronto, to the graduating medical classes (1894). Dr. Clark continued in charge of the Toronto Asylum up to 1905, when he retired to a well-earned rest, living in Toronto until his death in September, 1912. Dr. Clark was also for many years an extra-mural professor of Mental Diseases in the University of Toronto.

DR. JAMES RATCHFORD DEWOLF.

Dr. DeWolf, son of the Hon. T. A. S. DeWolf, was born at Wolfville, N. S., in 1819. His early education was obtained at Horton Academy. He studied medicine at Windsor, N. S., from 1836 to 1838, and received his degree of M. D. from Edinburgh University in 1841. Subsequently he was house surgeon to the Maternity Hospital, Edinburgh, and clinical clerk to the celebrated Prof. Sir Robert Christison, receiving the degree of L. R. C. S., England. Later he was elected to membership in the Medical Society of Paris, and the Medico-Psychological Association of Great Britain and Ireland. After returning to America he practiced for two years, 1842-43, at Kentville, N. S., and then for a short period at Brigus, Newfoundland. Removing thence to Halifax in 1844, he continued practice in that city up to 1857, when he was appointed the first medical superintendent of the recently created Nova Scotia Hospital for the Insane, a position that he held for over 20 years. Dr. DeWolf was president of the Nova Scotia Philosophical Society in 1849, and of the Nova Scotia Medical Society in 1866, while from 1871 to 1875 he was professor of Medical Jurisprudence at Dalhousie University.

During Dr. DeWolf's superintendence of the hospital the greater part of the construction work was accomplished, and to him fell the task of the organization of the staff and the overcoming of the troubles incident to the beginning of such an institu-

tion. The whole treatment pursued by him was embraced in a single idea, humanity, and he was ever governed by the law of kindness and the desire to relieve suffering. He instituted at the hospital a system of treatment free from restraint, seclusion, and the abuses, even at that day, still common, and soon established for the Nova Scotia Hospital the reputation of being one of the most advanced of the institutions for the mentally afflicted. A notice of his death at Halifax, in 1901, says:

His amiability of character, his solicitude for the welfare of those who came within the circle of his acquaintance, in a word, Dr. DeWolf's sterling attributes of heart and hand, are known to all men. The memory of his faithful labors will not perish.

Unfortunately Dr. DeWolf was not always able to agree with the members of his board, and his insistence upon his claim to be best qualified to determine what should be done in the management of the institution developed the hostility of some of these gentlemen. Dissensions arose in the hospital household also, and insubordination and disloyalty on the part of some of those associated with him brought about a condition of affairs which led to his retirement in 1878.

DR. JOHN ROBINSON DICKSON.

Dr. John Robinson Dickson was born in Dungannon, County Tyrone, Ireland, November 15, 1819. Educated in Belfast and Glasgow, he came to Canada in 1838, and graduated in medicine from the University of New York in 1842. Returning to Canada, he settled in Kingston, where he became prominent as a surgeon. He lectured at Queen's University for some years in surgery, and was afterwards dean of the medical faculty. In 1862 he was appointed surgeon of the Kingston penitentiary, and in 1868 medical superintendent of Rockwood Asylum. He died November 23, 1882.

DR. JAMES DOUGLAS.

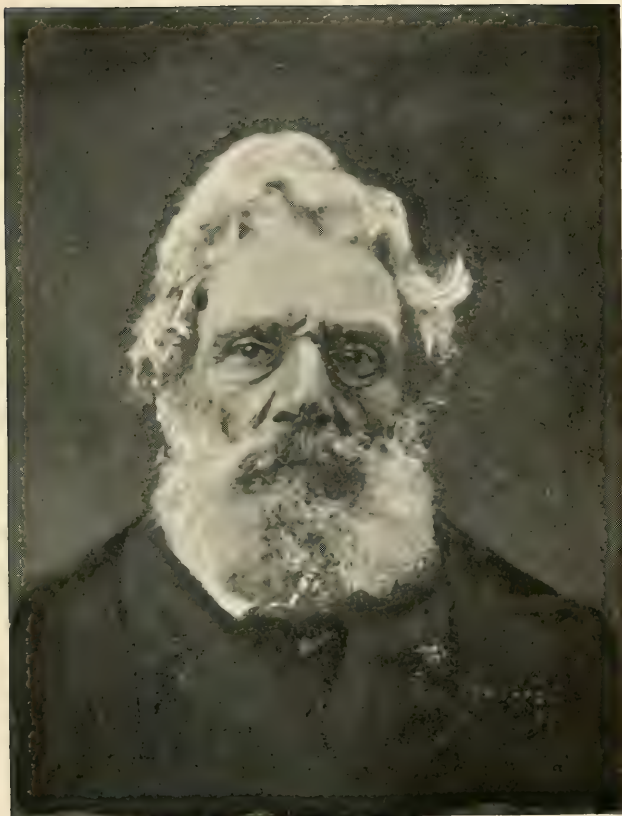
Dr. Douglas, pioneer alienist in the province of Quebec, was the son of the Rev. Geo. Douglas, a prominent Methodist, and a friend of the Rev. John Wesley. He was born at Brechin in Angus, Scotland, May 20, 1800. His early education was received principally in Dumfries. During the winter of 1812-13 he was

sent to the Wesleyan College at Woodhouse Grove in Yorkshire, but taking French leave from there returned to Dumfries. The next year his father was stationed at Penrith in Cumberland and he was bound there for five years as an apprentice to Dr. Thomas Law, an uncle of Lord Ellenborough. In the autumn of 1818, having completed his indenture, he betook himself to Edinburgh as a student of medicine. Even before the close of the session he accepted the position of surgeon to a Greenland whaler, sailing from Hull, which was fortunate in penetrating the Arctic Circle nearer to the North Pole than any ship prior to that date, except those under the command of Sir John Ross. At the close of his Arctic voyage he resumed his medical studies, and received his diploma from the Royal College of Surgeons, Edinburgh, on April 7, 1820. At Edinburgh he was one of the first pupils of Robert Liston, and was one of the first to apply his teachings on this continent. After taking his degree in Edinburgh he proceeded to London for the purpose of graduating there also in surgery, and attached himself to Guy's and St. Bartholomew's hospitals to attend the lectures of Mr. Abernethy and Sir Astley Cooper. On receiving his degree as M. R. C. S., London, he entered the service of the East India Company and proceeded to India. He returned to England in 1823 as surgeon of the East Indiaman "Competitor." His intention, having secured a permanent appointment in the company's service, was to return to it, but, tempted by salary and love of adventure, he joined instead, in 1824, as surgeon and physician, one of those ill-considered and ill-fated colonization expeditions to Central America made from Britain between the years 1820 and 1830. Here he was placed in charge of the short-lived colony known as Poyais Settlement, Honduras, but being severely attacked by fever sailed for the United States, landing in Boston. After a very narrow escape for his life owing to this illness, he made his way to Utica, N. Y., where he married and settled down to practice, and in 1824 was invited to deliver a course of lectures on anatomy and surgery by the Medical College at Auburn. In 1826 the trustees of Williams College conferred upon him the honorary degree of M. D. An ardent student of anatomy, and aware of the indispensable necessity of material for dissection, Dr. Douglas soon got into trouble in a matter of resurrection, and being in danger of arrest, made

a speedy flitting to Canada in view of the fact that body-snatching was a States' prison offence. After a short stay in Montreal, he journeyed to Quebec, arriving there on March 13, 1826, and without delay began work at his profession. The cholera epidemics of 1832 and 1834 brought him into prominence, he having been the first to proclaim the possibility, in fact the great probability, of its crossing the Atlantic. He was thenceforth one of the best and most widely esteemed practitioners in the city. Subsequently, at the request of the commissioners for the Marine and Emigrant Hospital, he took the medical charge of that institution, and there, in conjunction with Dr. Painchaud, delivered the first medical lectures ever given in Quebec. In 1845 the grand jurors having made a very strong presentment on the treatment of the insane by the religious communities, in whose care they were, he, at the solicitation of the government, agreed to take charge of them for a period of three years on the understanding that the government would then have a suitable place provided for them. This agreement led to the creation of Beauport Asylum, of which Dr. Douglas remained the head up to the time of his withdrawal in 1866, a period of 20 years. His character and methods as an alienist are thus depicted by his son, James Douglas, LL. D., of New York.

There never was a medical superintendent more beloved by his patients than was he. They called him in all sincerity their father. When he went through the wards they clustered around him like children. He had a kind word for all. He possessed that rare tact, so essential to all who would control the insane, of throwing them off the scent of their false fancies, without contradicting and irritating them. However irritable he himself might be with people accounted sane, he never lost his temper with those admittedly insane. In his medical treatment he put little faith in drugs as specifically curative agents in mental disease. . . . Whether rightly or wrongly, he was opposed to their administration when intended to act directly on the nervous system. He confined his treatment to maintaining his patients in as perfect a state of health as possible, and directing their thoughts from their diseased channels by work and amusements. . . . And like all who have had to do with these helpless, overgrown children of God's afflicted family, he was not only keenly interested in their treatment, but deeply attached to many of them.

During the horrors of 1847, caused by the failure of the potato crop, the frightful famine and the ensuing typhus (ship fever) which made Ireland well nigh desolate, Dr. Douglas took a promi-



DR. JAMES DOUGLAS.

ment part in combating the scourge. Hundreds of thousands fled for refuge to America; many died on shipboard while others landed on the shores of Canada only to succumb to the pestilence. Thousands died at Grosse Isle, at Quebec, and at every port along the waterways. In Quebec a private hospital was opened by Drs. Douglas and Racey, who anticipated the outbreak. It was on the Beauport beach and accommodated masters of vessels and cabin passengers who objected to going into overcrowded public hospitals. In 1849, owing to failing health due to a bronchial affection, Dr. Douglas decided to give up practice, though still retaining his connection with the asylum he had founded, and between 1851 and 1866, spent nine winters abroad, chiefly in Italy, Egypt and Palestine. In his later years he unfortunately embarked in gold and copper mining operations in the eastern counties which were without exception disastrous and engulfed his whole estate and left him sans property or resource at an age when he could not possibly retrieve his fortunes. He bore his reverses, however, without a groan, and, what still more bespoke his manliness, without reflection on others. He gave up his property and, what was harder still, his reputation for shrewdness without a murmur. This done, he accompanied his son to the United States, living with him for a time at Phoenixville, Pa., and later at New York, where he terminated a long and useful, though varied and eventful, life on April 14, 1886, in his 80th year. His character as described by his son, before referred to, was a strange mixture:

He possessed intellectual ability and force of will which would have made him a leader of men, had he been ambitious and had he sought a sphere where the full blaze of publicity would have fallen upon him; for in the practice of his own profession of surgery he was original and skilful to an eminent degree. And when he undertook any public work or advocated any public measure, which, however, he did only when the work or the measure fell within the sphere of his professional activity, he threw his whole strength into the enterprise or its advocacy, with such impulsive energy that he bore down all opposition and carried his point by sheer force of attack. Though overbearing, there lay in his nature a depth of tenderness which never came to the surface more attractively than in the presence of pain. While intolerant of disobedience or querulousness on the part of his patients, many a sufferer lay in unrest for hours waiting for his visit and for the luxury of being lifted and turned by his strong arms, and encouraged by his unfaltering and sincere opinion, even if adverse. . . . He was a superb man, endowed not only with remarkable gifts of mind, but a massive and well-balanced frame. Every feature of the face,

the size and contour of the head, even the bushy crop of hair, which refused to be smoothed but stood erect and defiant, bespoke strength of purpose and activity of intellect. Oliver Wendell Holmes, after once meeting him, said he did not know whether most to fear or admire him, but that in his head and figure he was the nearest approach to a Jupiter Olympus of any man he had ever seen. He had many of the qualities of greatness, for his character possessed the elements out of which either a man of wide professional repute or a statesman of commanding influence might have been compounded. . . . When under the strain of overwork and when irritated by confrères who were professionally his inferiors, he was apt to yield to unbecoming displays of temper and to offensive arbitrariness. An unhesitating reliance on his own judgment remained as a prominent trait of his character. And he possessed to an eminent degree the faculty of self-justification which accompanies most self-reliant natures.

DR. E. EVARISTE DUQUET.

Dr. Emmanuel Evariste Duquet was born in Ste. Philomene, Chateauguay County, Que., April 3, 1855, the son of Francis Duquet, a farmer.

His early education was at Beauharnois College, where he spent three years under the tuition of the Christian Brothers. At the age of 13 he left college to assist his father on the farm, but, with a natural aptitude for study, every spare moment was devoted to his books. By the death of his parents when he was 16 years of age he was thrown on his own resources, and went to Montreal to study a profession. In 1875 he began the study of medicine, and received his degree from Victoria College, Montreal, in 1879. He became a general practitioner at Longue Pointe, a suburb of Montreal, and soon became well and favorably known as an exemplary citizen and capable physician.

In 1885 he was appointed assistant physician to the St. Jean de Dieu Asylum, better known as the Longue Pointe Asylum, and afterwards devoted himself entirely to the study and treatment of mental diseases.

In 1887, upon the death of Dr. Howard, the medical superintendent, he was appointed to the vacancy by the Provincial Government, and held the position at his death.

Although of a delicate constitution, he never spared himself in his untiring efforts to improve the condition of his patients, who numbered fully 1300. The severe strain from the increasing mental and physical labor connected with so large an institution

undermined his health and rendered him unable to resist an attack of pneumonia, from which he died after an illness of eight days, on December 9, 1894, in his 40th year.

The classification of mental disorders was his favorite study, and his discussion of it in the psychological section of the International Medical Congress at Washington in 1887 was most favorably received.

During the summer of 1889 Dr. Duquet made an extended tour of Europe and visited many asylums. He also attended the International Congress on Mental Diseases in Paris in August of the same year, where he presented a paper on "Legislation Concerning Insane Asylums in the Province of Quebec." This paper, together with "Notes sur un cas de folie simulé," was published in the proceedings of the congress.

In November, 1889, he was elected an associate member of the Medico-Psychological Society of Paris.

In 1890 a similar honor was conferred upon him by the Société de médecine mentale of Belgium.

Dr. Duquet was married in 1884.

L'ABBÉ A. FAFARD.

M. Ambroise Martial Fafard, founder of Baie St. Paul Asylum, and son of Joseph Fafard, merchant, was born at L'Islet, November 24, 1846. After having successfully completed a classical course at the college of St. Anne de la Pocatiere, he studied theology, and was ordained priest at Quebec by Mgr. A. E. Taschereau, February 26, 1865. Immediately following his ordination, Abbé Fafard was called to the vicarage of Saint Roch at Quebec, and in October, 1866, was appointed the first curate at Inverness, Megantic Co., where he built a church, a presbytery, etc. In 1872 he was appointed missionary to the quarantine station at Grosse Isle, and here he remained until October of that year when he was named curate of St. Urbain, Charlevoix Co. In 1880 Mgr. Dominique Racine called him to Chicoutimi, and entrusted to him the duties of curate of the office of the cathedral and assistant-superior of the seminary. He at once proceeded to interest himself in finding means to liquidate the debt on the cathedral, and succeeded, by the publication of a book "The

Works of St. Francis Xavier," in raising the sum of \$4000 by the end of the first year. He busied himself as well with the organizing of a company for the construction of a railroad from Chambord, Lake St. John, to Chicoutimi, and all this was done without neglecting the spiritual welfare of his parishioners. In 1889 he was made parish priest of Baie St. Paul with the title of Vicar Forain, and amid these new surroundings, where he was to end his days, M. Fafard continued to be the same active and enterprising man. Under his powerful stimulus the peaceful village was rapidly transformed, an aqueduct and an electric light plant being public works which soon bore witness to the interest which the new incumbent took in the development of his parish. Soon after his arrival M. Fafard struck by the number of old people without homes determined to secure a shelter for them. The thought and its execution were almost simultaneous; the following November a house was ready to receive the sick, the aged and the infirm. This was known as St. Ann's Home, which later developed, mainly through the unceasing efforts of M. Fafard, into, and was incorporated as, Ste. Anne's Hospital at Baie St. Paul. Engrossed as he was with the establishment of his hospital on a firm foundation, the Abbé was never indifferent to the well-being of his flock. Beneath a brusque exterior was hidden a wealth of kindness of which only those in the immediate neighborhood knew. To all he gave a pleasant word, or one of encouragement or good advice, and when necessary, helped them with money or by his influence. Such activity and mental strain prematurely exhausted the physical forces of this truly good man who was taken away from his loving parishioners on August 12, 1899, in the 59th year of his age. On the 16th a most imposing burial service was held, His Highness Mgr. Michael Thomas Labreque officiating in the presence of a large concourse of clergy and members of his own and neighboring parishes. His remains, at first placed in the parish church, were exhumed at the time of the demolition of that edifice, and now rest in the cemetery of the Community of the Little Franciscan Sisters of Mary, of which he was the founder. It is also worthy of note that the Rev. Father was largely interested in the establishment of the first newspaper published at Chicoutimi and Baie St. Paul.



L'ABBÉ A. FAFARD.



ALFRED PERRY.



DR. JOHN WANLESS.

SAMUEL FINLEY.

Samuel Finley was born at Drumclaph House, County Tyrone, Ireland, June 21, 1827, and died September 1, 1903, in Montreal. After his education at a private school he commenced a business career at Londonderry with his cousin, Sir William McArthur, later becoming a partner and removing to London to manage the export Australian business of the firm. In 1852 he emigrated to Australia and in Melbourne opened a wholesale dry goods business under the name of Samuel Finley & Co. He visited England in 1860, while there marrying a Miss Emma Gault, of Montreal, and in 1865 retired from his Melbourne business to come to Montreal, Canada. Here he joined the firm of Gault Bros. & Co. with which he was associated for a number of years.

Highly successful in his business career, he was well to do, and both before and after his retirement from active commercial pursuits he gave liberally of his time and money to aid charitable and educational work. He was honorary treasurer and a governor of McGill University; treasurer and governor of the Wesleyan Theological College, a member of the Protestant Board of Public Instruction, and a member of the Committee of Management of the Montreal General Hospital. He was ever greatly interested in the Protestant Hospital for Insane, and was a member of one of the earliest delegations sent to Quebec to interest the government in the project of its establishment. A member of its Board of Management for many years, he was elected president in 1900, serving well and ably as such until his untimely death in 1903.

DR. JACQUES FREMONT.

Dr. Fremont was born at Quebec, October 17, 1806, and died on board the steamship "Bohemian" between Liverpool and Portland, Me., on December 20, 1862. His remains were interred at Quebec on the 31st of the same month. Dr. Fremont had been the chief assistant of Dr. Douglas in his surgical operations for many years, and in the organization of the Beauport Asylum became one of his partners in the institution. This connection continued up to the time of Dr. Fremont's death.

DR. GEORGE A. HETHERINGTON.

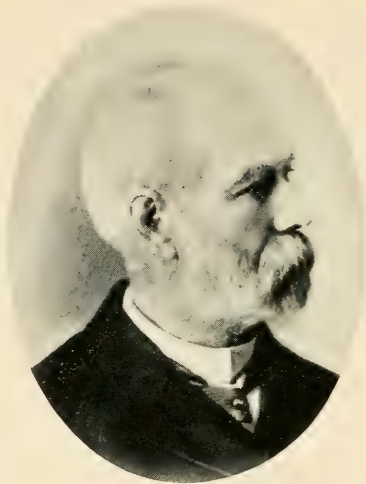
Dr. George A. Hetherington was born at Johnston, N. B., March 17, 1851, and died suddenly June 14, 1911, aged 60, at St. John, N. B., in which city the greater part of his professional life had been spent. His primary and collegiate education completed, he taught school for a short time, but soon after followed his natural bent to pursue medical study, and attended two years at the University of Michigan. While thus engaged he received an appointment on the staff of the Washtenaw County Asylum, and there gleaned his first knowledge of the practical care of the insane, and the study of psychiatry. He then completed his medical course in the College of Medicine and Surgery, Cincinnati, O., graduating in 1875. Postgraduate study in the New York Clinic followed, after which the young man returned to his native heath and practiced medicine successfully for about five years. At this time he took a further course of study in his chosen profession at the Royal Infirmary, Edinburgh, and the Rotunda, Dublin, which lasted for some months, he returning to St. John in 1882, where he resumed practice for many years. In 1896 he received the appointment of medical superintendent of the Provincial Hospital for the Insane at St. John, which position he held until 1904, when he reluctantly resigned owing to ill health. During his superintendency the affairs of the hospital were on a high plane, the institution being administered along modern lines, both in its medical and executive spheres. After his retirement he remained in St. John until his untimely death, though less able actively to continue practice, which indeed his ill health would not permit. Although his life was a busy one, he was prominent in many societies, being a life member of the British Medical Society, Fellow of the British Gynæcological Society, past chancellor in the Knights of Pythias, a 32d degree Mason, and paymaster of the 62d Regiment for many years with the rank of captain.

DR. CHARLES ERASTUS HICKEY.

Dr. Hickey, who on the resignation of Dr. McNicholl, had been appointed medical superintendent of the Hospital for Insane at Cobourg, Ont., died quite suddenly on September 19, 1908, at the age of 68 years. He graduated as B. A. from Victoria College



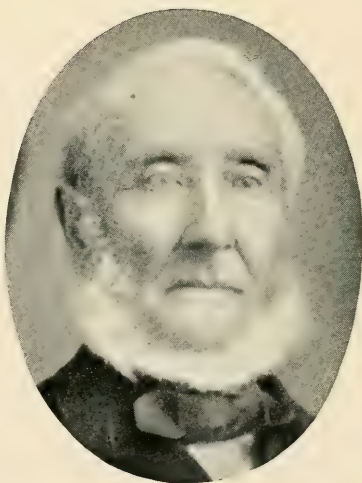
DR. JOHN WADDELL.



DR. J. T. STEEVES.



DR. G. A. HETHERINGTON.



DR. JOHN MACKIESON.

in 1863, and as M. D., C. M. from McGill University in 1866. He began practice in the town of Morrisburg, Ont., where he attained a high position in the professional, social and public life of the district, representing for a number of years the county of Dundas in the Dominion parliament. Dr. Hickey worked energetically during his too short (three years) time in charge and did much for the improvement of the institution. He was widely read in his professional work, and was highly esteemed by his confrères for his ability, his sound judgment and his true, manly spirit.

DR. HENRY HOWARD.

Dr. Henry Howard was born in Tipperary, Ireland, in 1815, and received his degree in London in 1838. In 1842 he came to Canada and settled on Amherst Island, near Kingston, but subsequently removed to Kingston, and later to Montreal. In 1861 he was appointed medical superintendent of St. Johns Asylum, which at first was opened in the old military barracks at Fort St. Johns. These had been relinquished by the imperial authorities and given to the western part of Quebec to be converted into a provincial asylum. He was appointed in June, 1861, and had about completed arrangements for filling the old fort with patients when, owing to the Trent affair, it was thought advisable to re-convert the asylum into a fort. Another institution was accordingly fitted up in an old building formerly used as a court house and was occupied in the following August.

The difficulties which he encountered in the effort to care for patients are detailed in another place.¹ It is the universal opinion that almost single-handed, with very inadequate buildings, he maintained the hospital until 1875, when it was closed and the patients were transferred to Longue Pointe. At this time he was appointed government visiting physician. In 1880 difficulties arose because he reported to the Sister Superior that several patients, in his opinion, had recovered and recommended their discharge. His recommendation was disregarded but he was supported in an appeal which he made to the Provincial Secretary. The discharge of patients being still refused, it became necessary to resort to civil authority to have the mandate obeyed.

¹ See History of St. Johns Asylum, this volume, page 270.

At this time Dr. Tuke made a report on the asylums of Canada and was especially severe upon the asylum at Longue Pointe. As a result of the agitation which followed and the protest of the Montreal Medical Society, an act was passed in 1885 under which Dr. Howard was appointed first medical superintendent, with highly increased powers. The difficulty, however, was not wholly adjusted during Dr. Howard's life. He died on October 12, 1887.

He was a close student of mental diseases and showed great force of character and was highly esteemed by all. He published a little work entitled "Criminal Responsibility," which was highly commended.

He was bright and interesting in conversation and made many warm friends.

DR. HENRY LANDOR.

Dr. Henry Landor was a descendant of an old English family whose name became historical through the literary genius and works of his cousin, the celebrated Walter Savage Landor. He was born in the Island of Anglesey, in Wales, in 1815. He spent his early boyhood in Liverpool, where he received his education under Dr. Prince. When he left school he went to Stockport to become an articled pupil to Mr. Richard Flint, surgeon to the Stockport Infirmary. Later he proceeded to London, and continued his studies at the Aldergate School of Medicine, from which he graduated in the session of 1835-36, receiving certificates of honor and the silver medal awarded in surgery.

In the year 1837 he became a member of the Royal College of Surgeons, England, and a licentiate of the Society of Apothecaries, London. He spent some time in walking the hospitals, after which he settled in private practice, until 1841, when he received an appointment as stipendiary magistrate in Australia, where he resided for six years and then returned to England.

In 1847 he was appointed colonial surgeon to the British forts on the Gold Coast of Africa. In 1849 he had an attack of pernicious malarial fever and was obliged to return immediately to England. He was carried on board ship in a state of insensibility, with little hope that he would survive, and reached England in a painfully debilitated condition. The invigorating change of

climate gradually restored him to health and strength. During his convalescence he wrote a pamphlet entitled "The Only Way to Stop the Slave Trade," which was favorably received by the public and had a large circulation.

When he recovered his health he entered upon the study of insanity, with the view of making it a professional specialty, and in 1850 became resident physician to the Higham Retreat (private asylum) at Norwich, County of Norfolk. Here he remained for nearly 10 years, pursuing his specialty, engaging in various scientific studies, notably geology and chemistry, and contributing occasional articles to the press. During this time he contributed to the Proceedings of the Royal Geographical Society a paper on the probable condition of the interior of Australia. In 1859 he became a member of the Royal College of Physicians, Edinburgh. He came to Canada in the fall of 1860 and settled in London, Canada West, now the province of Ontario, engaging in private general practice until 1868, when he was appointed medical superintendent of the Malden Lunatic Asylum at Amherstburg.

Two years later, when the Malden Asylum was closed because the new buildings at London were ready for patients, he was tendered the superintendency of the London Asylum, and removed thither in the fall of 1870, and remained until his death in 1877. The admirable order, discipline and working condition in which he left the institution bear ample testimony to the zeal and fidelity of his unremitting labors. He was a true, though unostentatious, philanthropist. His constant aim appeared to be the good of his fellow creatures. Endowed by nature with more than average mental ability, with advantages of a good professional training, a close thinker and shrewd observer in a wide field of observation, he was accustomed to form his own opinions and was ready to give a reason for the faith that was in him.

He died of diabetes mellitus on January 6, 1877.

JOHN WOODBURN LANGMUIR.

Mr. Langmuir, at one time Inspector of Prisons and Public Charities for the Province of Ontario, being the first to occupy that position after Confederation, was born at Warwick Mains, Ayrshire, Scotland, November 6, 1835, and died at Toronto, Ont.,

May 12, 1915, in his 81st year. Educated at Osborne's Academy, Kilmarnock, he came to Canada in 1849, and engaged in business in Picton, Ont., until 1868, being mayor of the town (1858) and serving as major during the Fenian Raid of 1866, receiving the military medal therefor. He was appointed Inspector of Asylums in 1868, ably filling the post for 14 years. During his term of office many new public institutions were established, and his wise counsel and efficient supervision aided largely in placing the Ontario asylum service on its present excellent footing. In 1882 he resigned his position under the government to associate himself with a number of prominent gentlemen in the formation of the Toronto General Trusts Corporation, the pioneer trust company of Canada, becoming general manager and vice-president of the organization. As chairman (1890) of the Royal Commission to inquire into the working of prisons, reformatories, houses of correction and the like in Ontario, his services were of much value in the realm of social reforms. He likewise served in the valuable capacity of chairman of Queen Victoria Niagara Falls Park Commission from its organization in 1885, and in the 20 years he was connected with this work accomplished much in the way of improving the environment of the great cataract. As president of the Homewood Sanitarium, a private institution for the insane, established at Guelph, Ont., in 1883, he also did much useful work. In 1906 he was appointed on a Royal Commission to inquire into life insurance in Canada, and was one of the promoters of the Hudson's Bay and Yukon Railway and Navigation Co.

DR. STEPHEN LETT.

Dr. Stephen Lett, who died October 11, 1905, was a son of the Rev. Stephen Lett, LL. D., D. D., of the County of Wicklow, Ireland, and later of Toronto and Collingwood. He was born at Callan, Kilkenny, Ireland, April 4, 1847, and was educated at Upper Canada College, Toronto. He became a member of the College of Physicians and Surgeons in 1870 and took his degrees at Toronto University.

For many years he filled the position of assistant medical superintendent in London and Toronto asylums, leaving Toronto in January, 1884, to become superintendent of the Homewood Sanitarium at Guelph.



J. W. LANGMUIR.



DR. DANIEL CLARK.

In the fall of 1901 he developed general paresis, which ended fatally in October, 1905.

Dr. Lett was well known all through Canada as an alienist of many accomplishments and enjoyed a well-deserved popularity. No doubt if he had remained in the Ontario service he would have become the head of one of the provincial hospitals, but as events proved he did an excellent work by founding the first private asylum of any importance in the Province of Ontario.

PETER LYALL.

Peter Lyall was born at Castletown, Caithness-shire, Scotland, in 1841; he died at Montreal, November 14, 1912. Receiving his education in Scotland, he gained a practical knowledge of contracting in his native land, and at the age of 29 came to Canada, settling in Montreal. After six years in association with his cousin, Peter Nicholson, a well-known contractor of Montreal, Mr. Lyall embarked in business for himself and five years later with his five sons formed the firm of Peter Lyall & Sons, general contractors, which was destined to become one of the largest ventures of its kind in the Dominion.

A thorough Scotchman, Mr. Lyall was an exemplar of the truest Scottish characteristics. Not excluding a keen regard for the humanities, shrewd and economical in the best sense, industrious, and "canny," yet he ever had a ready ear for the cry of the needy and the helpless of body, or the afflicted in mind. He was president of the Western Hospital, Montreal, for many years, and helped liberally with its finances. Mr. Lyall's name first appears as a member of the Board of Management of the Protestant Hospital for Insane in 1892, and he continued his interest in the institution until his death; he was elected vice-president of its governing body in 1901, and on the death of Mr. James Wilson, in 1905, was unanimously chosen president. His occupancy of the presidential chair was replete with many advances in the hospital's affairs, considerable expansion and general progress, no small part of which was due to his far-seeing advice and capable administrative qualities.

DR. JOHN MACKIESON.

Dr. Mackieson was the first superintendent to take charge of the original lunatic asylum of Prince Edward Island. He was born October 16, 1795, in Stirlingshire, Scotland, and educated at the University of Glasgow, receiving his diploma as M. D. November 15, 1815. He was a fine classical scholar, and also spoke French and German fluently. After practicing his profession, first in Stirling and then in Liverpool, he resolved to come to Canada, and sailed for Prince Edward Island in the brig "Relief," arriving at Charlottetown November 15, 1816. Here he soon acquired an extensive practice, and in 1840 was appointed health officer of the city. Elected superintendent of the new lunatic asylum in 1846, he continued in office until 1874, when he retired after nearly 28 years' service. Dr. Mackieson always took a great interest in military affairs, being appointed assistant surgeon of the tenth battalion in 1817, and subsequently (1822) its surgeon by Lieutenant-Governor Charles Douglas Smith; while by order of the Militia General Headquarters, he, in 1848, became surgeon-general of the militia forces of the province. After his retirement from the asylum, he continued in private practice in Charlottetown until his death in the latter part of 1885.

GEORGE MATTHEW.

George Matthew, although a layman, was the first superintendent of the first Canadian Asylum proper, that of New Brunswick. He was of Scotch-Irish parentage, his father being a ship-master from the port of Dumfries, Scotland, his mother from Cork, Ireland. Emigrating to St. John, N. B., his father there held the office of harbor-master, and there the subject of this notice was born, on February 1, 1795. After receiving a good education in his native city, he became a mill owner and merchant, but was caught in the financial disaster consequent on the removal of the protection which Great Britain had accorded to her colonies in early times. The removal of the protection on timber and lumber, which Quebec and the Maritime Provinces of British North America had enjoyed, allowed the free competition of Scandinavia and Russia and led to great financial losses to merchants in New Brunswick and elsewhere, including the subject of this sketch. On

the opening of the temporary lunatic asylum, in 1835, Mr. Matthew, who had previously been in charge of the Poors' Asylum where a number of lunatics were confined, was made superintendent, with Dr. Peters as visiting physician. Later (1843) he became one of a board of three commissioners who were placed in charge of the establishment. His connection with the institution was maintained up to 1844, when he retired. Mr. Matthew's reports, made during his incumbency of office, are, where obtainable, interesting in the extreme. Unfortunately that for 1837, which gave a history of the asylum, is lost; being in manuscript only it was probably, with many other old and valuable documents, destroyed during the great fire of 1877. In his report for 1874, Dr. Waddell, then medical superintendent, in a brief résumé of the history of the hospital pays the following tribute to Mr. Matthew, who died in Brooklyn, N. Y., on May 23, 1883, at the age of 89 years:

It is here only proper to record that much credit is due to Mr. George Matthew, for his energetic exertion on behalf of the insane—and especially of the poor of that class of sufferers—as an overseer of the poor and superintendent and commissioner of the temporary asylum. His benevolent labors lie at the very basis of all that has since been done to ameliorate the condition of the insane, and they should not be overlooked or forgotten.

DR. THOMAS R. McINNES.

His Honor Thomas R. McInnes, M. D., Lieutenant-Governor of British Columbia, was the son of John McInnes, a native of Inverness, Scotland. He was born at Lake Ainslie, N. S., November 5, 1840, and was educated at the Provincial Normal School, Truro, N. S. He studied medicine at Harvard University and at Rush Medical College, Chicago, graduating M. D. in 1869. In the same year he was admitted a member of the College of Physicians and Surgeons, Ont. He practiced for some years at Dresden, Ont., but removed to New Westminster, B. C., where he at once entered into a large and lucrative practice. Appointed medical superintendent of the insane asylum January 1, 1879, he remained in office up to 1883, when he resigned. He was also for five years physician and surgeon to the Royal Columbia Hospital, and sat for New Westminster in the House of Commons from 1878 to 1881, when he was called to the Senate by the Governor-General, the Marquis of Lorne. In November, 1897, he was appointed Lieutenant-Gov-

ernor of British Columbia. As a public man he favored the establishment of a Dominion mint, the political disenfranchisement of the civil service, and compulsory voting. He was the first member of either the Senate or the Commons to advocate on the public platform unrestricted reciprocity with the United States. His death occurred at Victoria, B. C., March 15, 1904.

DR. W. G. METCALF.

Dr. W. G. Metcalf was born in 1847, in the town of Uxbridge, Ont. He began asylum life in Toronto on August 7, 1871, as clinical assistant to Dr. Workman, and laid the foundation of his future success. In 1874 he left Toronto Asylum to engage in private practice, but shortly after returned to become assistant medical superintendent, which position he filled until June, 1877, when he was transferred to a similar post in the London Asylum. In April, 1878, he was placed in temporary charge of Kingston Asylum during the illness of Dr. Dickson, and when the latter retired from service, was appointed medical superintendent, a position he continued to occupy until he fell at his post of duty.

On the morning of the 13th of August, 1885, while making his usual round in company with his assistant, he was fatally stabbed in the abdomen by a criminal lunatic; he never rallied from the shock and passed away in peace on the 16th of August, 1885.

As a practical administrator he had few equals and no superior. His creed was taught him by his well-loved preceptor, Dr. Workman, and its prominent characteristic was "my patients first." He was an enthusiastic worker and a believer in details, sparing no pains to master every point in connection with any labor he undertook, and his genius for mechanics rendered him particularly efficient as a practical manager of asylum affairs. His prominent mental characteristics were earnestness, sincerity and love of justice. At the time of his death he was a firm believer in non-restraint, although when he adopted this system on trial three years before he was convinced that non-restraint could not be carried out. He never forgot that insane patients are human beings and at all times had a pleasant smile and kind word for those under his care. As he lived, so he died, thoughtful of all but himself; as he felt the near approach of death, he summoned

his officers to his bedside and bade each one an affectionate farewell, with almost his last breath saying, "Wish the attendants good-bye for me and tell them my hope is that they will all continue their work patiently and perseveringly." No murmur of reproach for his sad fate escaped his lips—the painful injury was borne with heroic fortitude and he died in his private office as most brave men wish to die, at the post of duty.

Modestly he lived, bravely he died, and by deed, not words, built for himself a monument more lasting than brass.

DR. THOMAS J. MOHER.

Thomas J. Moher, medical superintendent of the Hospital for Insane at Cobourg, Can., died at his residence February 24, 1914.

He was a son of William Moher, ex-Reeve of Douro, where he was born. He was educated at Lakefield, Peterborough and Toronto universities. After graduating in medicine he began practice in Peterborough. He afterwards moved to Trenton, where he carried on his profession very successfully. Returning to Peterborough he practiced in that city for several years, and was superintendent of St. Joseph's Hospital, coroner for the county, medical examiner for the C. M. B. A. and the Catholic Order of Foresters, and first president of St. Peter's Total Abstinence Society.

In 1902 he was appointed assistant superintendent of the Orillia Hospital for Feeble-Minded. Two years later he was made medical superintendent of the Hospital for Insane at Brockville. He was transferred to the Cobourg Hospital for the Insane as superintendent in 1910, where he remained until his death.

He wrote many interesting papers for the bulletin of the Ontario Hospitals for the Insane.

In June, 1908, he read a paper entitled, "Insanity, the General Public and the General Practitioner," at the meeting of the Canadian Medical Association in Ottawa. In June, 1909, he read a paper on the "Employment of Women Nurses on the Men's Wards in a Hospital for the Insane," at a meeting of the American Medico-Psychological Association in Atlantic City.

Dr. Moher possessed a peculiarly genial, friendly personality which endeared him to all with whom he came in contact, and he was popular wherever he went.

His sympathy and tenderness towards his patients were unfailing and his death was keenly felt by them.

DR. ALFRED MORIN.

Dr. Morin, son of Toussaint Morin, merchant, was born at Baie St. Paul, Que., May 12, 1861. After a brilliant course at Chicoutimi Seminary, he attended Laval University and was granted a license to practice medicine in 1888. Some months afterward he became totally blind, as the result of an accident which had occurred to him at school. Such a misfortune would have ordinarily spoiled a young doctor's career, but not so in this case. After the first shock was over, Dr. Morin gave himself up all the more completely to his profession, which he practiced devotedly and patiently. Though deprived of sight, and with hearing slightly defective, his medical career was successful in the extreme. His reputation as a capable physician influenced Rev. Father Fafard to have him appointed medical officer in charge of his Baie St. Paul Hospital. From 1889 up to the time of his death, April 2, 1902, he gave whole-heartedly and devotedly the benefit of his skill to the sick of the institution; he would even put himself out day and night for the sake of a poor idiot with as much care as though he were treating an intelligent person and expecting a large fee. His death was universally mourned, and his memory is still green where he was so often called upon to minister to the afflicted.

DR. JOSEPH MORRIN.

Dr. Morrin, one of Quebec's foremost physicians in the early part of the nineteenth century, was a partner of Dr. Douglas in the creation of the Quebec Lunatic Asylum, in 1845. The place and date of his birth seem to be unascertainable, but his medical degrees were taken in the London and Edinburgh universities and he rose to high eminence in his profession, as well as taking a prominent part in public affairs, being twice elected mayor of Quebec. He was one of the three original governors of the Quebec Marine and Emigrant Hospital, where the first medical lectures ever given

in the province were delivered in 1837. The first Canadian Medical Society, known as the Quebec Medical Society, was started in that city with Dr. Morrin as its first president. Morrin College was founded by him, and in 1831 he was elected honorary librarian to the Literary and Historical Society of Quebec, which was originated by His Excellency the Earl of Dalhousie in 1824. Dr. Morrin's connection with the Quebec (Beauport) Lunatic Asylum extended up to 1860 when he disposed of his interest in the establishment to Drs. Douglas and Fremont. His death occurred in the city for which he had done so much on August 29, 1861, at the age of 67 years.

DR. JOHN BERNARD MURPHY.

John Bernard Murphy, medical superintendent of the Asylum for the Insane at Brockville, Ont., died very suddenly January 17, 1904.

He was born in Peterborough County, Ont., March 31, 1850, and was at the time of his death in the 54th year of his age. He was educated at Norwood High School and at St. Michael's College, Toronto, before entering upon his professional studies. He graduated in medicine, the prize man of his year, at Queen's University, 1876. He began the practice of medicine at Belleville, Ont., and continued a successful career with a large clientele until the year 1890, when he became resident physician at Mimico Asylum. In 1894, when the asylum was opened at Brockville, he was promoted to be medical superintendent, a position which he held until his death.

DR. GEORGE HAMILTON PARK.

According to the record Dr. George Hamilton Park appeared before the Upper Canada Medical Board, April, 1834. "The Board is (was) perfectly satisfied by his examination and grants him a certificate to that effect." He was a native of Canada, where or when born is not known, the son of Captain Park, a veteran of 1812. Like most natives of that period, and even of subsequent times, he did not enjoy the opportunities of acquiring a good primary education. But in the study of medicine he was fortunate in having the instruction and guidance of the prince of

Canadian medical teachers, Dr. John Rolph. After obtaining his license he practiced at Simcoe for seven or eight years. He also practiced at Ancaster. He married a sister of Dr. Rolph, and through the doctor's influence was, in 1848, appointed superintendent of the Toronto Lunatic Asylum.

Dr. Park received a complimentary address on leaving Simcoe, signed by upwards of 200 persons. It is dated August 28, 1848. The address says, referring to his appointment: "It is the respect and affection which your urbanity of manners, your liberality in the promotion of public improvements, your generosity and bounty to the poor, your honorable principles as a man, and your acknowledged skill as a physician, which have so universally gained for you this regard of the community."

But Dr. Park, before many months, found that his position was a bed of thorns.

Had he had a fair chance, it is believed that he would have well succeeded in discharging the duties of the office. While at the Toronto Asylum he was liked by the inmates, which is no mean criterion. Dr. Park, for a time, was lecturer on anatomy at Rolph's School. He finally settled at Ancaster, where he died. The date of his death is not given.

ALFRED PERRY.

Alfred Perry, born in 1820 in Wiltshire, England, died in Outremont, a suburb of Montreal, on March 27, 1900. Emigrating to Canada with his parents as a lad of 12, the family came to Montreal, the father soon being struck down with cholera then raging in the city, leaving young Perry fatherless, but with a devoted mother to guide him through his early years. The lad took up the trade of cabinet-maker, but abandoned it to join the militia when the rebellion of 1837 broke out. Here he rendered signal service, volunteering for more than one unusually hazardous duty. The rebellion having ended and the Reform party coming into power, the passage by it of the Rebellion Losses Bill aroused intense indignation among many of those who had volunteered to fight the rebels, as well as the populace generally. This culminated in rioting following the signing by Lord Elgin at the Parliament Buildings in Montreal of the obnoxious bill, in 1849, the rioters,

headed, it is regrettable to state, by "Fred Perry," advancing on the buildings and ere they could be stopped wrecking them completely; fire broke out while the demolition was in progress, and soon the buildings were in flames, and utterly destroyed. Mr. Perry and four of his associates were put under arrest charged with the serious offences of arson and treason. Mr. Perry always contended the burning of the buildings was accidental, resulting from the breaking of a gas chandelier, and that nothing more than the smashing of the furniture of Parliament was intended as a protest against the ill-chosen piece of legislation. He and his friends were liberated within three days, later being given a nominal trial. Perry *le diable*, the sobriquet given him by his French-Canadian friends, was not entirely an honorary title.

During the ship fever of 1847, which numbered its victims by thousands, Mr. Perry showed perhaps the first evidence of the immense philanthropy which actuated him all through his long life; his exertions on behalf of many of these poor emigrants marked him as a man, large hearted, unselfish, "sans peur et sans reproche."

There is no doubt that the idea of separate provision for the Protestant insane in the Province of Quebec originated with Fred Perry, and that chiefly due to his efforts was public interest aroused in the project of establishing the Protestant Hospital for the Insane at Verdun. For a number of years he had taken an interest in the subject of the care of the insane, and had given valuable assistance to Sister Thérèse de Jésus (née Cleopée Têtu), the founder of the Roman Catholic Asylum at Longue Pointe, which was opened in 1875. Familiar with the conduct of this hospital, and giving the Sisters of Charity their full due for their care of the insane, yet Mr. Perry observed it was largely custodial. In his attempt to remedy matters and secure more scientific methods in the treatment of mental cases, which he began about 1875, Mr. Perry found that according to the existing contracts between the government and the proprietors of the hospital at Longue Pointe, no change was feasible in the methods of care and treatment while such contract operated. He then conceived the radical idea of establishing another institution which would care for the Protestant insane solely. In 1880 he called the first public meeting on the subject and although beset by great difficulties, many seemingly

insurmountable, and restricted by the fact that the plan required considerable money which he found exceedingly hard to get subscribed, he neither stayed his efforts, nor rested, till in 1890 the hospital was an accomplished fact. He served as a member of its Board of Management, and on his retirement, in 1897, was unanimously elected honorary president.

His interest in the institution continued up to the time of his death, and while his energetic and impulsive nature caused him to make mistakes at times, they were errors of judgment, never of conscience. His reputation for uprightness, his fighting qualities, and withal his unselfishness rendered the community the poorer by his passing, but the institution which he can truly be said to have fathered, stands as a monument to his memory for all time.

DR. GEORGE P. PETERS.

Dr. George P. Peters, born in St. John, August 19, 1811, was a son of the Hon. Charles J. Peters, for many years Attorney-General of New Brunswick. Having studied and obtained his degree at Edinburgh University, he returned to St. John, where he practiced up to the date of his taking charge of the Asylum. After his retirement he lived on a farm which he owned in Lancaster Parish, where he died in 1857. Dr. Peters seems to have been an able administrator, as evidenced by the commissioners in their report referring in complimentary terms to the efficient manner in which the details of the establishment, so far as completed, had been carried out by him. They also gave him, in addition to his year's salary, £50 for extra services connected with the commencement of laying out the grounds.

DR. WILLIAM REES.

William Rees, M. D., an Englishman by birth and education, came from England in 1819 and commenced the practice of his profession in Quebec. Toward the close of 1829 he went to York (now Toronto), and having passed the examination of the Medical Board, January, 1830, purchased the practice of Dr. Daly. This inscription appeared in the *Upper Canada Gazette*: "Dr. Rees has taken rooms, corner of Market Square, King Street. He will vaccinate and give advice gratis to the poor, Monday, Wednesday

and Saturday." In 1832 he disposed of his practice to Dr. Grasett and removed to Cobourg.

The following card later appeared in the *Cobourg Star*: "Dr. Rees, professionally educated in England, pupil of Sir Astley Cooper, and 10 years a practitioner in the Canadas, respectfully tenders his services to the inhabitants of Cobourg and vicinity. October 21, 1832." But his stay at Cobourg was a short one, and he returned to Toronto.

Dr. Rees was a many-sided man. He conceived various projects of a scientific and benevolent character. He was regarded as of a speculative rather than practical disposition and of unusual intelligence and public spirit.

Mrs. Jameson, in her entertaining narrative of her sojourn in Canada, says that Dr. Rees entertained the idea of founding a house of reception for destitute female immigrants, where, without depending on charity, they might be boarded and lodged at the smallest possible cost and be respectably protected until employment was obtained.

He presented a petition to Parliament in 1836 praying the grant of a sum of money for the erection of a provincial museum. He planned to establish in connection with the museum a botanical and zoological garden on a grant of land on the government reserve in the western part of the city. It, however, came to nothing.

He was surgeon to the 1st West York Battalion, 1837.

Another enterprise is indicated in the following:

To Medical Students: In pursuance of a plan for establishing a school of medicine in this city, Dr. Rees proposes to deliver a course of lectures on obstetrics and the diseases of women and children on the first Monday in November next. Anatomy, physiology, surgery, materia medica, the principles and practice of physics, chemistry and medical botany are the subjects which will be comprehended the ensuing season.

Arrangements necessary with the other medical gentlemen will be determined by the 1st of October, when a prospectus and further particulars may be had on application as above (postpaid). Toronto, August 4, 1834.

It is stated that Dr. Rees was also the originator of the present Toronto Club.

Up to 1841 no insane asylum existed in Upper Canada. In January of this year the Provincial Asylum was first opened in Toronto by virtue of an act passed in 1839, largely through the

activity of Dr. Rees. The provincial authorities had acquired the old gaol at the east side of Toronto Street, north of King Street, after the new gaol in the east end had been completed. He was the first superintendent of the asylum, which at first had 17 patients. This building was soon densely filled, and it became necessary to procure further accommodation for the numerous applicants for admission. The eastern wing of the Parliament buildings was appropriated to this purpose, and subsequently a still further addition was made by the occupation of a vacant house near the old garrison. The three buildings were used until the present asylum was ready for occupation. Dr. Rees held the position of superintendent until he was succeeded by Dr. Telfer.

Dr. Rees, notwithstanding his evident ability and enterprise, unfortunately seems to have been wanting in a proper mental balance. Concerning his connection with the Provincial Lunatic Asylum, the following memorandum was made by a friend:

Dr. Rees was a learned man on some things, but an eccentric and most sanguine man—was always considered flighty and never had much practice. Through his energy the first lunatic asylum was established in Toronto, and he was appointed to the superintendency and management thereof (upon the principle, I suppose, of setting a madman to watch a madman). He was seriously injured by a blow on the head from one of the patients, the effects of which he felt to his dying day. Very properly after this he was removed from his position, and the asylum placed in other and, undoubtedly, more able hands, . . . But poor Rees never recovered from the effects of the step which, no doubt, the government felt constrained to take. He brooded on the injustice that he thought had been done him, and he never ceased to mourn over the neglect that the country had shown him. In all his madness he made several good speculations in land, but the benefit of these was reaped by others.

Dr. Rees repeatedly applied for some compensation for the time he had given in organizing the asylum and in the sacrifices he had made in connection therewith. As late as 1869 he memorialized the government, but without success. That his application was considered a just one by some is shown by the following comments in the *Dominion Medical Journal*:

We call the attention of the profession to the memorial of Dr. Rees, one of the oldest and most respected practitioners in this province. His case is well known to a large number of medical men, who have at various times endeavored to obtain justice for him from the government. All he asks is a proper recognition of his services, and of the injuries which

he received while discharging his duties as medical superintendent of the asylum. He is now nearly blind from the formation of cataract, which is the consequence of injuries received by him while attending a lunatic in the asylum. We hope that medical men will interest themselves in this case and interest the representatives from their several constituencies to obtain justice for an old public servant, who well deserves a pension for his untiring efforts in behalf of a class of the community the most unfortunate and, until his efforts in their behalf, the most neglected in the country.

Opposite the old Parliament buildings, on what was called the "Broken Front," Dr. Rees constructed a wharf, which was long known as "Rees' Wharf." Near it, under the hill, he built a small but comfortable house, in which he passed his bachelor life, always ready to welcome any visitor and interest him with anecdotes, of which he had a large fund. The date of his death is not given.

DR. THOMAS W. REYNOLDS.

Dr. Reynolds was the son of Thomas Reynolds, M. D., of Brockville, Ont., and was born June 6, 1858, in that city. He was educated in the public schools there and McGill University, where he took his degree as M. D., C. M. in 1881. He began the practice of his profession in Hamilton, Ont., and, in 1885, was appointed to the medical staff of Hamilton Asylum, later becoming assistant superintendent. He continued his official connection with that institution to the last, with the exception of about a year (1890) spent as superintendent of the newly opened Mimico Asylum. He then requested to be allowed to return to his former position. Contracting a cold in the early part of 1902, accompanied by cough and hæmorrhage from the lungs, he went south in the hope that the climate of North Carolina would improve his health. At the beginning of June he left the south for home, but stopped off at Baltimore to consult Dr. Osler, who had been a personal friend and college chum at McGill. The fatigue of the journey produced extreme exhaustion upon a debilitated system which was the subject of tubercular disease. He was at once sent to The Johns Hopkins Hospital by order of Dr. Osler, where he received the best attention and the greatest possible kindness, but in spite of all that could be done, he gradually sank and died the following day, June 9, 1902. The untimely death of Dr. Reynolds at the early age

of 45, and in the midst of his usefulness, was greatly lamented by his numerous friends, and especially at the asylum where he was much beloved by every one. He was a man of a lovable disposition and generous impulses, one never known to be out of temper. He was more than usually fitted for asylum work—was punctual and methodical in everything, and always at his post. If he erred at all it was in too great devotion to his work. Ever anxious to serve others he thought least about himself, and in that sense he died a martyr to his professional duties and the great charity which was his life's work.

DR. JOHN SCOTT.

Dr. Scott was born at Strabane, County Tyrone, Ireland, in 1816, and in 1831 was apprenticed to learn the business of an apothecary. He began his medical studies at the University of Edinburgh and received a certificate therefrom in 1835, securing the degree of M. R. C. S., London, May 24, 1841. Coming to Toronto, Ont., he married, in 1844, the only daughter of the Rev. John Roaf, a minister of the Congregational Church, and a prominent member of the Board of Commissioners of the lunatic asylum. Dr. Scott engaged in practice at Toronto until appointed to the charge of the asylum in January, 1850. This position he held until 1853 when he found the office made so intolerable to him, by the twelve magnates who were managers, that he resigned, feeling that he did not receive fair play. After severing his connection with the institution he resumed practice in the city, where he was made coroner. His death took place there in May, 1864. Dr. Scott seems to have been an able man professionally, but was possessed of an overbearing manner and an irritability of temper that ill fitted him for the charge of a large public establishment such as a lunatic asylum.

DR. JAMES A. SIVEWRIGHT.

Dr. Sivewright, who was born in Chatham, Ont., in 1850, was the son of Dr. J. H. Sivewright, of that city. His earlier education was acquired at the public and grammar schools there, while his medical studies were conducted at Queen's College, Kingston, where he graduated as M. D., C. M. He first went to Africa as medical officer of an exploring party, and while there had a severe



DR. J. McL. WALLACE.



DR. T. W. REYNOLDS.

attack of fever. Returning to Canada he went out to New Westminster, B. C., as a partner of Dr. T. R. McInnes, then a member of the House of Commons, and afterwards Lieutenant-Governor of British Columbia. In New Westminster Dr. Sivewright took charge of the Asylum for the Insane, nominally as *locum tenens* for Dr. McInnes, who was visiting physician to it, but actually as head of the institution. After a time, retiring from partnership with Dr. McInnes, he thought of establishing himself elsewhere, but finally decided to settle permanently in New Westminster, where he speedily attained the position of the leader of his profession in that part of the province. In March, 1883, he was formally appointed medical head of the asylum, and in the following month received the additional appointment of medical officer to the Royal Columbian Hospital. A few weeks afterwards he was prostrated by a severe chill, resulting from exposure while visiting a patient at a distance from town. This was followed by an attack of typhoid fever, from which he died, May 18, 1883, at the early age of 33 years.

DR. HENRY HUNT STABB.

Henry Hunt Stabb was born in 1812, at Torquay, Devonshire, England. Educated in Torquay, he began the study of medicine at the age of 15 in Edinburgh, where he graduated in medicine. He joined Dr. Carson, of St. John's, N. F., as assistant, and was associated with him for two years. His interest in the insane in this colony dates from this period. He found six male maniacs occupying basement cells of the old Fever Hospital, since destroyed, where they were chained to benches and walls with a bedding of straw and with their food passed to them in tins tied to the ends of long poles. Seeing them in this wretched condition, he began agitation in favor of better housing and treatment. After repeated efforts he induced the government to lease a small cottage called "Palks" on the Waterford Bridge Road, and became the attending physician with 10 patients.

During this time he kept up his general practice and labored as secretary of the Board of Health in an epidemic of cholera and also of smallpox.

In 1848 he received promises of large donations from several friends, residents in St. John's, if the government would build a proper asylum.

Miss Dix, who visited St. John's during this year, offered a donation of £100, took great interest in the work and collected other subscriptions from abroad. The Governor, Sir G. De Marchand, also used great influence with the government, which finally consented and appointed Dr. Stabb to visit continental and English institutions for the purpose of studying their methods of management. He spent one year in Paris schools and in visiting Germany, England and Scotland, before his return in 1852.

Upon his plans and suggestions the present asylum was commenced in 1853. The building consisted of a central block for physician's residence, kitchen, engine room, etc., and a wing attached to it, consisting of a lower ward for males and upper ward for females, and an attic for extra males, with a total accommodation of 45 male and 30 female patients. It was finished in 1855.

In the year 1860 the Prince of Wales visited the island, and his attendant physician, Dr. Ackland, was surprised and pleased with the institution and encouraged Dr. Stabb to leave St. John's to seek a position in England.

In 1863 it was found necessary to build a wing, corresponding to the first, capable of containing 60 beds to be occupied by female patients.

In 1873-76 two additional wings were erected to separate noisy and violent cases from convalescents.

In his declining years he enjoyed robust health; always abstemious, a non-smoker, a good pedestrian, he remained in possession of his faculties up to 73 years of age, when his memory slowly began to fail. Retiring from his work in 1889, his physical health remained good for two years, when signs of cerebral softening showed themselves in slight attacks of aphasia and right paralysis; these recurring at intervals of three or four months, until he had a cerebral hemorrhage, he became comatose and slowly passed away without suffering on the 17th of May, 1892, eight days after the beginning of the seizure.

DR. JAMES THOMAS STEEVES.

James Thomas Steeves was of German descent and born at Hillsboro, N. B., January 25, 1828. Educated at the local school there, at Sackville Academy, and at the Baptist Seminary, Fredericton, N. B., he entered on the study of medicine at the Uni-

versity of Pennsylvania Medical School, and graduated from the University of New York in the class of 1853. He began the practice of his profession in the parish of Portland, now a part of the city of St. John, in June, 1854, but removed to the city in 1864 and erected a block of buildings, where he resided and practiced until 1875, when he was called to take charge of the asylum. He ranked high as a surgeon and obstetrician, and when the general public hospital was opened at St. John's, in 1864, was appointed one of the staff of visiting physicians. He was a member of the first medical council of New Brunswick (1860) under the English Medical Registration Act, the first president of the New Brunswick Medical Council under the New Brunswick Medical Act of 1880; also vice-president of the Canada Medical Association. In 1892 he visited Great Britain, Ireland and the Continent to see the asylums there, and at other times visited many of the institutions in Canada and the United States. In 1889 he was called upon to give expert testimony in a case at San Diego, Cal. Throughout his asylum career Dr. Steeves proved himself a worthy successor of Dr. Waddell, and during his 20-year service did much toward bringing the New Brunswick institution to its present excellent condition. His death took place at Lancaster on March 3, 1897.

DR. WALTER TELFER.

Dr. Telfer was a native of Scotland and the holder of a diploma from the College of Surgeons, Edinburgh, also of a certificate from the Upper Canada Medical Board, before which he appeared in 1833. He settled in Niagara about 1826, and took a prominent part in the affairs of the town, but in 1835 removed to Toronto, where he soon commanded a large practice. He was considered skilful, was highly respected by his confrères, and had the confidence of his patients. He loved his profession, not as a means of acquiring wealth, but for the aid and comfort he was able to give the afflicted.

Dr. Telfer succeeded Dr. Rees as superintendent of the Toronto Lunatic Asylum in 1845, and held the office for three years, being dismissed by the Governor-General in 1848. His removal was the cause of a good deal of newspaper controversy. It was alleged by

many that the government found an excuse for this action at the demand of Dr. Rolph, a man of great political influence, while, on the other hand, the organ of the government declared that it was for good cause. The dismissal, whatever may have been the true cause, does not seem in the least to have affected his standing in the community or profession. He again resumed practice in the city, where he was given a place on the staff of the Toronto General Hospital, and at the time of his death, in 1857, was an active member of the Upper Canada Medical Board.

SISTER THÉRÈSE DE JÉSUS.

Cleopée Têtu, known among the Sisters of Providence as Sister Thérèse de Jésus, and the foundress of the existing Longue Pointe Asylum, was a truly remarkable woman. Intelligent, with wonderful force of character, indomitable energy and pre-eminent business ability, she was well fitted to found and conduct a great institution. Born at St. Hyacinthe, Quebec, on December 3, 1824, she received an excellent education with the Sisters of the Congregation of Notre Dame, who had an establishment in her native place. In October, 1844, at the age of 20, she entered a convent of the Sisters of Providence, and took the vows in July, 1846. Though so young, she was, in 1849, placed at the head of the hospital of St. Jérôme in Montreal, where she remained until 1854, when she went to Burlington, Vt., to preside over the orphanage of St. Joseph. At the end of three years' work there, her superior decided to confide a still more difficult task to her, and she was sent to a mission of the Order in Chili. This mission had been founded under peculiar circumstances. In 1852 the Sisters had been invoked to establish a hospital in Oregon, and a few of them were sent to undertake the work. The voyage in those days was a long and difficult one, having to be made by way of the Gulf of Mexico and Isthmus of Panama to San Francisco. Arrived at Oregon City, the Sisters found that they had had their journey for nothing, almost the entire population of the place having deserted it for the gold fields of California. Undaunted, they started on their return voyage, which, for the sake of economy, they determined to make by way of Cape Horn. On reaching Santiago, Chili, however, they yielded to the entreaties of the bishop of that city to remain

and assist in founding an asylum there. It was to complete the formation of this establishment that, in 1857, Sister Thérèse, accompanied by Sister Augustin, was sent to Chili. She finished the duty assigned to her in an admirable manner, and returned to Montreal in 1863. In 1866 she was appointed Treasurer-General of the Order, and as such made herself thoroughly conversant with all the affairs of the community. So successful was her business administration that when, in 1873, it was mooted that the Sisters should treat with the provincial government for the erection of an idiot asylum, Sister Thérèse was designated as representative of the corporation of the Sisters of Providence. Such was her début into the great work of her busy life, the founding and establishment of L'Hospice St. Jean de Dieu. On her death, which occurred November 22, 1891, although only superior of the asylum, her body, as a special mark of honor, was interred in the space reserved for the Superiors-General of the Order in the cemetery of the convent St. Isidore at Longue Pointe.

FRANCIS WOLFERSTAN THOMAS.

Francis Wolferstan Thomas was born at Moorminstow, Cornwall, England, January 9, 1834, and died at Montreal, May 18, 1900. The son of the Rev. F. W. Thomas, Rector of Parkham, North Devon, England, he was educated at King Edward VI School, Sherborne, Dorset, and at first it was intended he should enter holy orders; later, probably at the boy's own request, it was decided he should seek a military career; ere a commission was secured for him, however, he left for Canada in 1851, where he joined the Bank of Upper Canada as a junior. After a year in the service of this bank, he became connected with the Bank of Montreal, and progressed steadily until in 1865 he was promoted to the post of manager of the London branch; here his ability was so well marked that in 1870 he was offered the general managership of Molson's Bank, Montreal, which he accepted. His superintendency was characterized by much success, the bank expanding greatly in its business, and strengthening its financial position.

Outside of his profession Mr. Thomas' name was well known as that of a public-spirited citizen, whose time, talents and service were never found wanting when works of improvement were to be done, or the general good furthered. The number of charitable

and educational movements in Montreal with which he was prominently connected were legion. Perhaps one of the most noteworthy was the erection of the Montreal General Hospital Jubilee Training Home for Nurses, the scheme being carried out in 1897, and due almost entirely to his personal efforts.

He was one of the first to become interested in the formation of a hospital to care for the Protestant insane of Quebec Province, and as early as 1884 was a member of a deputation chosen to wait upon the government and urge a reform in their treatment, also to ascertain what the administration was willing to do to help the erection of a separate institution for Protestants; he was a member of the first, or provisional, directorate of the Protestant Hospital for Insane, its treasurer for many years, and was president of its Board of Management from 1898 to 1900.

DR. ARTHUR VALLÉE.

Dr. Vallée was born at St. Roch, Quebec, December 23, 1848, and died at the Hôtel-Dieu there, January 23, 1903, at the age of 54. While others may have gained more renown, his was a career that few could excel. A student of Laval University in 1867, he left that institution in 1873 with the degree of M. D., and was admitted to practice in 1875. After a prolonged absence in Europe, spent in study, he occupied successively the chairs of Medical Jurisprudence, Clinical Medicine, Obstetrics, History of Medicine, and Mental Diseases at the Hôtel-Dieu and Laval University, Quebec. As a professor, his diction was clear and erudite, and up to the end of his useful life he was an honor to his school and to the French-Canadian medical profession. His public lectures were always looked forward to with pleasure by his fellow citizens. Clearness of mental vision, and a ripe judgment, together with great aptitude for work were characteristics that especially fitted him for speculative medical science, and it was in his work as an alienist that the philosophical trend of his mind found its highest expression. In November, 1879, he was appointed one of the visiting physicians to the Quebec Lunatic Asylum, and in 1885 became medical superintendent of that institution. During his too brief régime Dr. Vallée introduced many valuable reforms into the hospital, including the total abolition of mechanical restraint, and various struc-

tural changes. His position as superintendent gave him the field for prosecuting his researches into questions of mental and nervous diseases, and early in his career his competency was acknowledged. Unfailing in his loyalty, he was greatly beloved by his colleagues. He was a brilliant conversationalist, refined in temperament, a man of taste, and above all generous to a fault.

DR. JOHN WADDELL.

Dr. John Waddell, the second medical superintendent of the New Brunswick Hospital for Insane, was the son of Rev. John Waddell, a Scotch Presbyterian minister, and was born at Truro, N. S., March 17, 1810. Having received a good primary education there and at Pictou Academy, N. S., he, in 1834, began his medical studies under Dr. Lynds, of Truro. These were continued at Glasgow, Scotland, and, in 1839, he received his diploma as member of the Royal College of Surgeons, London. During the winter of 1839-40 he attended medical lectures at Paris, and in the summer of 1840 returned to his native town and entered on a practice which was continued up to the date of his appointment to the superintendency of the New Brunswick Asylum, December 1, 1849, which office he assumed on the sixth of that month. On resigning his position, May 1, 1876, he returned to Truro, his birth-place, where he died August 29, 1878.

More than once during his 26 years' tenure of office the various commissioners expressed their unqualified appreciation of Dr. Waddell's able conduction of the asylum, and on his retirement reiterated these encomiums. Throughout his alienistic career Dr. Waddell showed himself a broad-minded, liberal and energetic administrator, one ever keenly observant of the best interests of his patients and the advancement of his institution. His yearly reports are replete with interest, and in the last of these he thus expresses his views on asylum management :

In hospitals for the insane, it is very desirable to obtain the largest measure of home comforts that can be commanded without resorting to extravagance. An abundant supply of good, wholesome, well-cooked food; also, the best arrangements possible to provide for the patients that are able and willing to work, the means to do so in a manner the most agreeable to them; also, the means to relieve those who do engage in work, by alternating with books, amusements and recreations.

DR. JAMES McLAREN WALLACE.

Dr. Wallace was born at Kirkintilloch, Scotland, in 1837. His primary studies were conducted in the public schools of his native town, and his professional education and degree were obtained at the Andersonian University, Glasgow. Arriving in Canada in 1861, he began practice in the village of Spencerville, Grenville Co., Ont. Here he remained until 1876 when he was appointed to the superintendency of the Orillia Asylum for Idiots, and thence was transferred to the charge of the Insane Asylum at Hamilton on February 14, 1877, as successor to Dr. R. M. Bucke. He was active, energetic and far-seeing, and did much to improve the buildings and newly laid out grounds and provide a good foundation for future development. Owing to continued ill-health he resigned from the superintendentship in 1887, much to the regret of his staff; and, after a time took up private practice in Hamilton, subsequently moving to Port Elgin, where he died of apoplexy on February 17, 1896.

DR. JOHN WANLESS.

Dr. John Wanless was born at Dundee, Scotland, on May 26, 1813, and died at Toronto, Ont., April 14, 1901. He received his medical education at Edinburgh University, and after graduation, which occurred at the early age of 20, he spent some time as ship surgeon and in hospital work. Some of his experiences while acting in the former capacity are well worth relating, notably those of one voyage which, like Sir A. Conan Doyle, he made as surgeon on a large whaler, and which was full of "hair breadth 'scapes." Later, the young man, led by the adventuresome spirit no doubt, decided to try the hazard of a life in Canada, and came to London, Ont., to practise at the age of about 27. Soon after he was established there, he met a homeopathist, and being a sturdy allopath himself, he undertook to denounce by his pen the new system of medicine and all its works; curiously enough, in his studies which were to enable him to shatter the opposite school to his own satisfaction, he found much to interest and finally attract him, and ere long he became a full-fledged homeopathist himself—in Goldsmith's words, "Who came to scoff, remain'd to pray."

In 1861, Dr. Wanless, now as trenchant a homeopathist as the best, was asked by a number of the leading practitioners of that

school in the city of Montreal to come there and begin practice, aiding this medical system by his efforts. This he did, soon establishing an excellent practice, and he was chiefly instrumental in causing legislation to be passed giving the school of homeopathy recognition and rights in Canada.

An ardent Scotsman, he was prominent in the affairs of St. Andrew's Society; he was the first honorary secretary of the Protestant Hospital for Insane, at Verdun near Montreal, being elected December 20, 1886, and resigning in 1892; he also was a member of the first, or provisional, directorate of the hospital formed in 1885. He was of vast assistance to the institution during its formative period.

His last few years were spent in Toronto, and there death called him, at the advanced age of 87, at the close of a useful life.

HON. J. K. WARD, M. L. A.

James Keirley Ward was born in the Isle of Man at Peel, September 9, 1819, and died at Westmount, October 2, 1910. He received his education at May's Academy, Douglas, Isle of Man. Coming to America at an early age he secured a position as clerk in a lumber mill at Troy, N. Y., later securing its lease and operating it under his own management. The increasing difficulty in finding standing timber in that part of New York State caused him to come to Canada in 1853, where he secured an establishment with timbered lands on the Maskinonge River, Que., remaining in the enterprise for ten years. In 1870 he opened the Mona Saw-mills in Montreal, which city then became his home, and he successfully conducted this business on an extensive scale. He was an ardent advocate of the study of forestry, and thoroughly understood his subject both from its scientific and practical aspects, having read able papers before various interested societies, such as the American Forestry Congress, etc.

He was interested in many other commercial ventures, being on the directorate of several important Montreal concerns. He was called to the Legislative Council of Quebec in 1888 by the late Mr. Mercier, then premier of the province.

His connection with Montreal charities was large, and his wise counsel was much sought on the administrative boards of these various projects. He was a life governor of the Montreal

General Hospital, of the Women's Hospital and the House of Industry and Refuge. One of the first to sympathize with the movement to establish the Protestant Hospital for Insane, he furthered the scheme with his customary vigor, and at one time had personally pledged, in connection with three or four others, many thousand dollars to the government, in order to rescue the institution financially—a pledge which fortunately was not exacted, as the necessary sum was raised by popular subscription. The incident, however, serves to show his generous character. He was president of the Board of Management from 1888 to 1898, when he retired at his own request owing to advancing years, after nearly ten years of faithful and able service.

JAMES WILSON.

James Wilson was born in Ireland in 1847 and died in Montreal, January 10, 1905. He came to Canada at an early age, and succeeded in taking a front rank in business in Montreal. In 1873 he established the firm of James Wilson & Co., a concern dealing in railway and steamboat supplies, which grew to large proportions under his able direction. He was connected with other commercial ventures, being vice-president of the Dominion Cotton Mills Company and a director of the Montreal Cotton Company at the time of his death.

Mr. Wilson devoted much attention to the cause of charity; he was president of the Irish Protestant Benevolent Society for some years, and treasurer of the Protestant House of Industry and Refuge. He served as a member of the Board of Management of the Protestant Hospital for Insane from 1896 until 1903, when he was elected president of that body on the death of Mr. Samuel Finley. As chairman of its executive Mr. Wilson was capable and efficient and his term of office was all too short, being terminated by his untimely death after less than 18 months' service.

DR. BENJAMIN WORKMAN.

On the 26th of September, 1878, Dr. Benjamin Workman died at his residence, Uxbridge, Ont., in the 85th year of his age. He was born in Ireland in 1793, and in 1819 came to Canada and settled in Montreal, where he conducted for several years a suc-

cessful school. In 1852 he took the degree of M. D. and in 1856 was appointed assistant to his brother, Dr. Joseph Workman, in the Toronto Insane Asylum, which position he filled with rare fidelity, intelligence and zeal until 1875, when failing health compelled him to retire. For some years he had labored under a chest trouble which had been diagnosed as thoracic aneurism; the ultimate cause of his death, hemiplegia, which ended fatally in 24 hours, was probably due to a clot carried from the aneurismal sac into the cerebral circulation. He was a man of extensive professional and literary attainments, an earnest student, and a noble example of the quiet, unassuming Christian gentleman. He left behind him an enviable record of simplicity, energy and devotion.

DR. JOSEPH WORKMAN.

Dr. Joseph Workman was born in Lisburn, Ireland, May 26, 1805, and died in Toronto, April 15, 1894, at the age of 89 years. He came to Canada from Ireland in 1829, and graduated from McGill College in 1835. In 1836 he removed to Toronto and engaged in business, but returned to the practice of medicine 10 years later. For some years he filled the chairs of materia medica and obstetrics in Rolph's Medical School and became favorably known as an able physician. In 1853 he accepted temporary charge of the Toronto Asylum, at the personal solicitation of Dr. Rolph, and his appointment was made permanent in April, 1854. He remained in office for 22 years, resigning in 1875. He was markedly successful as a superintendent and soon became known as the most noteworthy of Canadian alienists. Much that is best in the present system of care of the insane in Canada may be traced to his influence. Possessed of much energy and executive ability, Dr. Workman, during his management of the Toronto Asylum, introduced many improvements, one of the first of which was a reconstruction of the drainage. On assuming charge he had found 347 patients in residence, many of whom had frequent attacks of erysipelas, diarrhoea and dysentery. Setting to work to investigate the cause he soon found that the whole space beneath the basement was a foul and enormous cesspool. When this was emptied it was found that while the basement drains and main sewer were admirably constructed, by some oversight no connec-

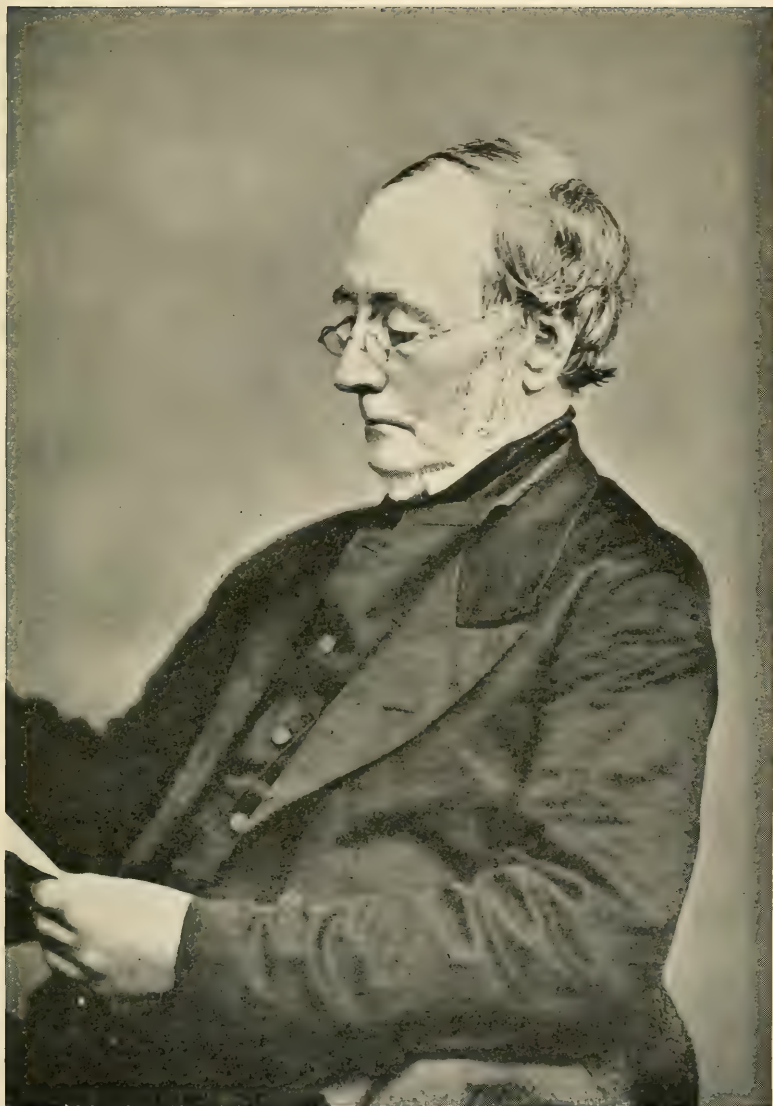
tion had been made between them, with the result that nearly four years' accumulation of filth had collected there. When this condition was remedied there ensued a marked improvement in the general health of the household.

After his resignation of office Dr. Workman spent the remainder of his life in Toronto. He was an accomplished linguist and during his last years found his favorite occupation in the translation of articles, generally relating to psychiatry, for various medical periodicals. These translations possess a strong individuality, Dr. Workman's style of writing being always pungent, clear and flowing.

Although as a young man an ardent politician, he was never a believer in the so-called political methods which time after time in many asylums have caused the sacrifice of the interests of the insane to the demands of political exigency. He steadfastly resisted any attempts to convert the asylum into a machine to satisfy the demands of political office-seekers, and would willingly have sacrificed his position rather than wink at the perpetration of a wrong. When, after 22 years of faithful service, he began to chafe in official harness and longed for rest, the decision to retire once made was soon carried into practice. There was nothing to put in order—the institution was in excellent condition; the running gear well oiled; harmony in every department, and an *esprit de corps* among the officials that argued well for the comfort of a successor.

For many years he was much criticised by the legal fraternity and press for his theories in regard to "insanity and crime," as he fearlessly maintained the medical view of responsibility in mental disease. In the court-room, as a witness and medical expert it was soon learned that he could not only enforce respect when under examination, but could also cover with confusion any facetious attempts to divert him from his fixed purpose. Gifted with an excellent command of language, a wit as keen as a Damascus blade, a perfect grasp of man's mental attitude and a profound knowledge of science it can easily be understood why he was *facile princeps* among witnesses.

His contributions to alienistic literature have been many. In Europe his name was well known, and he was made an honorary member of medico-psychological societies in Britain and in Italy.



DR. JOSEPH WORKMAN.

ADDENDA.

MICHIGAN HOME AND TRAINING SCHOOL.

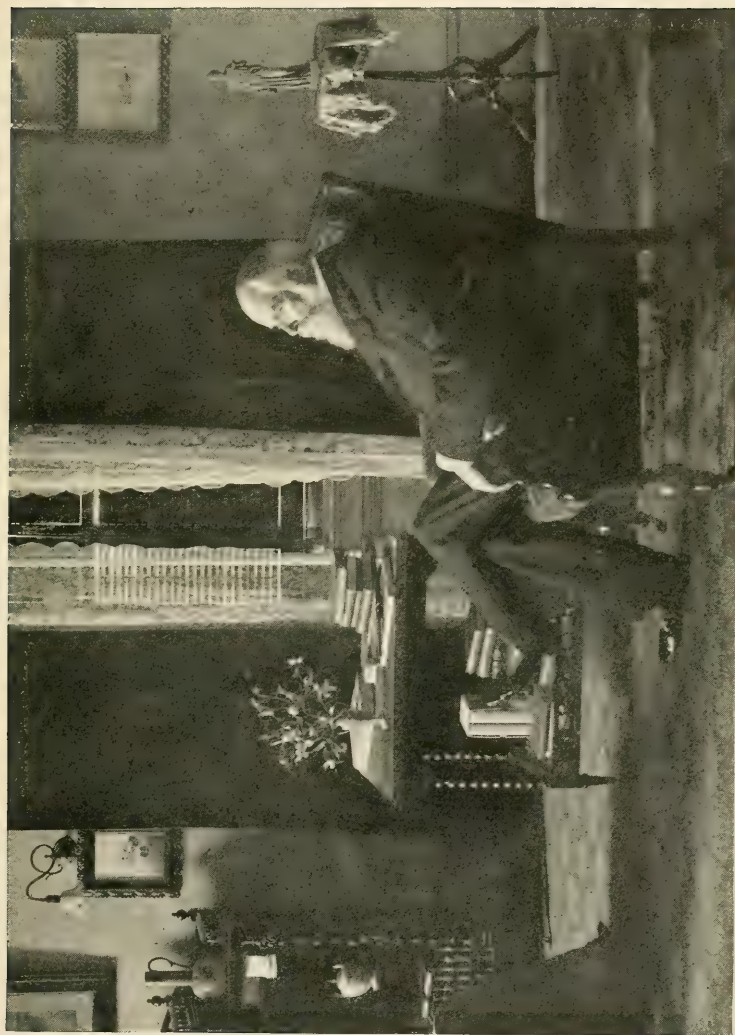
LAPEER, MICH.

The Michigan Home and Training School was established by act of the Legislature, 1893, approved by the Governor June 2, 1893, "to provide by all proper and feasible means the intellectual, moral and physical training of that unfortunate portion of the community who have been born or by disease have become imbecile, feeble-minded or epileptic, and by a judicious and well-adapted course of training and management to ameliorate their condition and to develop as much as possible their intellectual faculties, to reclaim them from their unhappy condition and fit them as far as possible for future usefulness."

The Board of Building Commissioners, consisting of Governor John T. Rich, Cyrus G. Luce, John G. Sharp, Loren A. Sherman and John Hevener, located the home at Lapeer, on a tract of land of 160 acres presented to the state by the citizens of Lapeer. With the initial appropriation of \$50,000 there were constructed two patients' cottages, dining-room and kitchen, with the necessary service buildings to accommodate 200 patients. The Home has grown steadily until to-day (January 1, 1917) there are accommodations for 1450 patients and property valued at \$950,000, consisting of 710 acres of land, 15 patients' buildings and 32 other buildings.

BOARD OF CONTROL.

Loren A. Sherman.....	1895-1897	John S. Weidman.....	1909-1911
George R. Gold.....	1895-1901	A. E. Meigs.....	1911-1915
John Hevener	1895-1905	J. V. Frazier, M. D.....	1911-1915
Albert N. Stephens	1897-1902	O. L. Millard.....	1911-1915
N. R. Gilbert, M. D.....	1901-1912	Norman Flowers	1911-
George Nester	1902-1905	C. C. Peck.....	1912-
J. R. Johnson.....	1905-1911	C. J. Walz.....	1915-
M. J. Murphy.....	1905-1911	John S. Smith.....	1915-
Horace N. Kitchell.....	{ 1909-1911 1915-		



DR. C. K. BARTLETT.

In 1904 the Department of the Interior contracted with the hospital for the care of the public insane of Alaska, and for 13 years this service has been under Dr. Coe's charge.

In 1910, the city having closely crowded around the site of the institution, the old site was sold and a new one purchased, a mile further out and adjoining the city limits, where a large double-story pavilion and nine other buildings were erected. The grounds owned and leased cover some 75 acres. A parole cottage, 50 by 120 feet, was formally opened on Christmas, 1916. This includes hydriatric equipment, bacteriological quarters and other modernization. Dr. Coe is superintendent. Dr. J. W. Lucky is first, and Dr. C. U. Snider second, physician. The institution has 300 beds.

DR. CYRUS K. BARTLETT.

Cyrus K. Bartlett was born at Boxford, Mass., January 23, 1829. Having received an academic education, supplemented by a course of study under private tutors, he entered the Harvard Medical School, from which he received the degree of M. D. in 1852. After his graduation he practiced in Charlestown, Mass., until 1858, when he was appointed assistant physician to the Massachusetts State Lunatic Hospital at Northampton, and for a time served as acting superintendent of that institution. In November, 1868, he was elected superintendent of the Minnesota Hospital for the Insane at St. Peter, entering upon his duties there in the following December. He continued as superintendent of the hospital until his resignation in 1894, after which time he made his home in Minneapolis during the remainder of his life. Dr. Bartlett was genial, courteous and respected, and was considered as especially fitted to carry out the relation of superintendent to the patients and to the hospital in a way satisfactory to his associates and to the patients.

DR. PHILO OLIVER HOOPER.

Philo O. Hooper was born in Little Rock, Ark., October 11, 1833. His father died during his boyhood, and upon his mother fell the duty of rearing him. For some years he attended Nashville University. Returning home he secured a clerkship in a drug establishment, and at the same time studied medicine under

the late Dr. Lorenzo Gibson, Sr., with whom he was admitted to partnership after his graduation in 1854-55 from Jefferson Medical College. During the Civil War he was president of the Confederate Judicial Board for Arkansas. At the close of the war he was associated with the late Dr. Breysacher, and continued in medical practice until he was appointed superintendent of the Arkansas State Hospital, upon the retirement of Dr. Forbes, in 1886. This position he held, with a short intermission, during the remainder of his life, his death occurring on July 29, 1902.

DR. GEORGE FREDERICK KEENE.

George F. Keene was born in Whitman, Mass., October 22, 1853. He received his preliminary education in the schools of Whitman, and after his graduation from the high school entered Brown University, from which he was graduated in 1875. He entered the Harvard Medical School, graduating in 1879, at the same time receiving the degree of A. M. from Brown University. During his course at Harvard he served for 18 months in the Boston City Hospital, receiving a diploma from that institution in 1880. He also received a diploma from the Boston City Hospital Medical Improvement Society and became a member, this honor being conferred upon him in recognition of his invention of a splint for Colles fracture. In May of the same year he commenced practice in Providence, R. I., and shortly afterwards was appointed out-patient surgeon to the Rhode Island Hospital and lecturer to the Hospital Training School for Nurses, which position he retained until his removal from Providence in 1886.

In 1884, during the illness of Dr. Chapin, Dr. Keene was engaged to lecture on physiology at Brown University. In March, 1883, he was elected physician to the State Institutions at Cranston, and in 1886 was appointed resident physician and deputy superintendent of the State Hospital for the Insane. He was later made superintendent, which position he held until his death in 1905, in his 52d year.

Dr. Keene accompanied the State Commission appointed by the Legislature to investigate sanatoria for consumptives in the New England States. Under his advice and supervision the

tuberculosis wards at the State Almshouse were erected, which were models of their kind. He was one of the first to advocate the use of tents for insane patients infected with tuberculosis. He was the first medical superintendent of the State Hospital for the Insane in Rhode Island, and regarded his appointment as a high honor. A physician in the truest meaning of the term, he encouraged and stimulated those about him to do their best in the profession, the practice of medicine being to him above all other considerations.

CHANGES IN NAMES OF STATE INSTITUTIONS OF WEST VIRGINIA.

The following changes have been made in the names of the state institutions of West Virginia :

West Virginia Hospital for the Insane, located at Weston, has been changed to Weston State Hospital.

Second Hospital for the Insane, located at Spencer, has been changed to Spencer State Hospital.

West Virginia Asylum, located at Huntington, has been changed to Huntington State Hospital.

ERRATA.

Vol. I, page 428, line 8, "certificates for two physicians" should read "certificate from a physician."

Vol. I, page 446, line 11, "Sister Charon de la Barre" should be "Sieur Charon de la Barre." Line 12, "her" should be "him."

Vol. II, page 93, under Appendix A, Report of Committee, October 3, 1842, should be 1822.

Vol. II, page 439, foot-note, "Dr. M. L. Jones" should be "Dr. M. L. Perry."

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[This Index was prepared by Mr. Dysart McMullen and Miss Mary Brinkley.]

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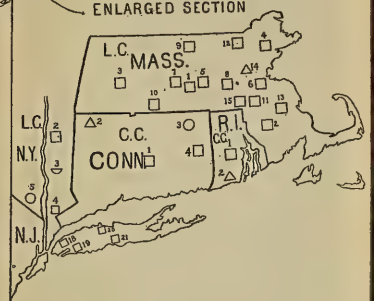
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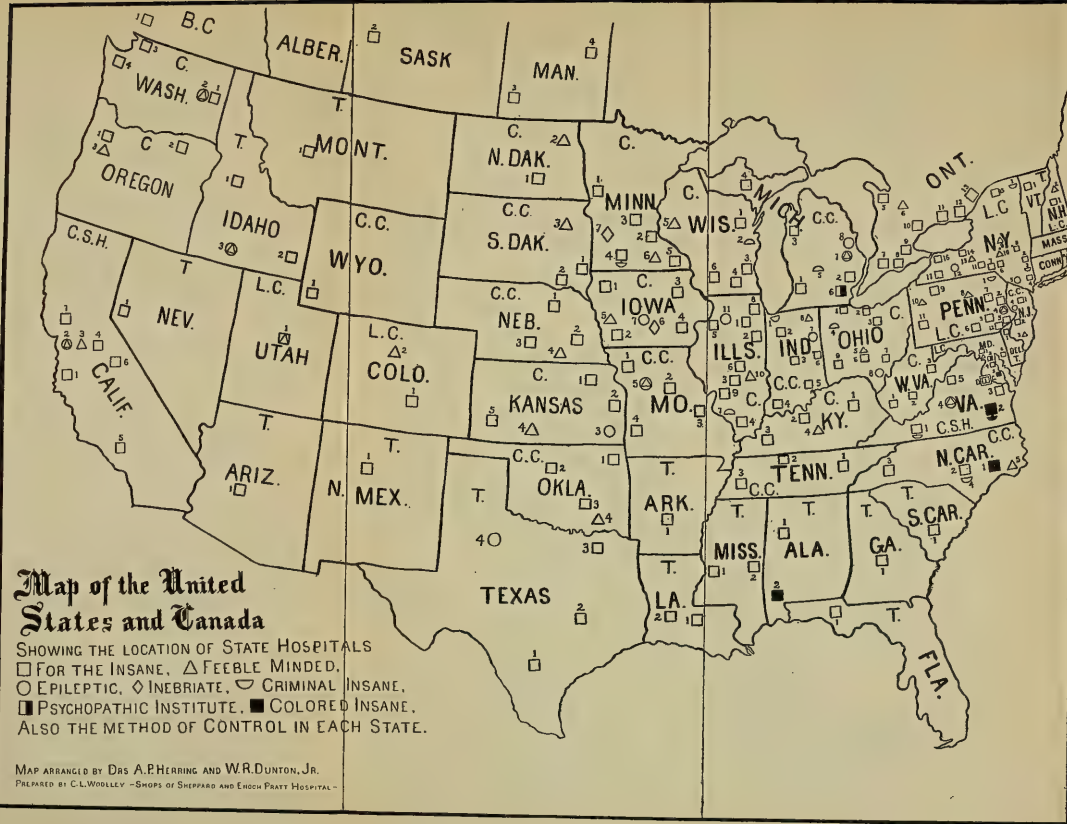
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- C.S.H.- COMMISSIONER, - STATE HOSPITALS



Map of the United States and Canada

SHOWING THE LOCATION OF STATE HOSPITALS
 □ FOR THE INSANE, △ FEEBLE MINDED,
 ○ EPILEPTIC, ◇ INEBRIATE, ▽ CRIMINAL INSANE,
 ▢ PSYCHOPATHIC INSTITUTE, ■ COLORED INSANE,
 ALSO THE METHOD OF CONTROL IN EACH STATE.

MAP ARRANGED BY DRS A.P. HERRING AND W.R. DUNTON, JR.
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